

The Long Journey Home XII
Treatment of Posttraumatic Stress Disorder in the Department of Veterans Affairs:
Fiscal Year 2003 Service Delivery and Performance

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Executive Summary

In the decades since the end of the Vietnam conflict, the treatment of veterans suffering from war-related Posttraumatic Stress Disorder (PTSD) has become a major priority for the Department of Veterans Affairs (VA) health care system. Starting October 1, 1995, the Veterans Health Administration (VHA) of VA underwent a major reorganization into 22 semi-autonomous Veterans Integrated Service Networks (VISNs). FY 2002 saw further reorganization with the consolidation of VISNs 13 and 14 into the newly designated VISN 23. The implementation of the VA reorganization and the budget stresses during recent years have stimulated a major review of VA mental health care programs at the VAMC, VISN, and national levels. The shift of the locus of service from costly inpatient programs to more accessible outpatient and community-based clinics is a national VHA goal and continues as a major focus of activity, with a large number of the Millennium Bill programs becoming operational in FY 2002. In the past several years the spectrum of programs for the treatment of PTSD in VA has substantially widened to include a rich array of outpatient clinics, short-term hospital programs, and non-hospital residential rehabilitation programs, gradually replacing the once widely established Specialized Inpatient PTSD Units (SIPUs). Evaluation studies have shown that long-term inpatient treatment of PTSD is not more effective than shorter term hospital treatment with outpatient follow-up care, and is considerably more costly (Fontana and Rosenheck, 1997a). These findings have stimulated significant reallocation of resources for PTSD treatment.

This summary of data on VA treatment programs for PTSD is a component of the National VA Mental Health Program Performance Monitoring System (Rosenheck and Greenberg, 2003), and has been prepared to assist clinicians, administrators and planners in their review of programmatic options for treating PTSD. Information is presented in four sections: (1) A national overview and performance assessment of PTSD treatment in VA including utilization data on both specialized and non-specialized programs; (2) A review of patients treated and services delivered by the Specialized Outpatient PTSD Programs; (3) A review of changes in VA's programmatic capacity to provide treatment for PTSD, and (4) Outcomes monitoring of Specialized Intensive PTSD Programs.

In this report we present information on:

- (1) the population of veterans residing in each VISN, including the number and percent who are service connected or low income (27.5% of all US veterans), the total number who receive VA compensation for PTSD (215,109), and the proportion who use VA mental health services annually (10.4% of all eligible veterans; 61.2% of all those service connected for PTSD);
- (2) the distribution of specialized PTSD programs, and their funding, across VISNs (there are 144 specialized programs nationwide, ranging from 4-11 per VISN);
- (3) population coverage and workload of specialized *outpatient* PTSD programs (71,538 veterans were seen in FY 2003, a 6.1% increase over FY 2002, and 54,533 veterans were treated [seen more than once] in FY 2003, a 6.9% increase over FY 2002);

- (4) workload and cost data on treatment provided by specialized *outpatient* PTSD programs (there were 645,895 visits in FY 2003, a 2.6% increase over FY 2002; the average cost per visit was \$79 and the average cost per capita was \$931);
- (5) population coverage and utilization of *inpatient* treatment for PTSD (VA Census data show 236 occupied general psychiatry *beds* are used to treat veterans with a primary diagnosis of PTSD, a 3.1% increase from FY 2002, constituting 7.6% of all general psychiatry beds. Discharge data show a total of 6823 *episodes* of inpatient treatment for PTSD in FY 2003, compared to 7175 in FY 2002, a 4.9% decrease);
- (6) workload and cost data on treatment provided by *specialized* inpatient and residential PTSD programs (there were 4302 admissions in FY 2003 at an average cost of \$5438 per admission and \$138 per day);
- (7) a summary PTSD performance score which evaluates each VISN on its delivery of both inpatient and outpatient PTSD services;
- (8) the characteristics of patients treated in VA's specialized outpatient PTSD programs;
- (9) changes in PTSD program workload, staffing and costs during the past two years, and
- (10) outcomes of PTSD treatment in specialized intensive programs;
- (11) the total number of outpatients treated for PTSD in the VA system broken out by whether they received treatment in a specialized PTSD program (62,270), from a PTSD specialist (15,536), from a mental health program other than the above (122,856), or from a non-mental health program (21,279) [see Appendix E].

For ease of reference, Appendix B presents the goals for the Special Emphasis Programs for PTSD as introduced in VHA Directive 96-051, *Veterans Health Administration Special Emphasis Programs*, and as modified subsequently with the approval of the Clinical Quality Improvement Specialist, Office of Performance and Quality, VA Headquarters.

PTSD is one of the most prevalent of war-related illnesses. Providing high quality treatment for PTSD will remain a top priority for VA as it builds on the clinical experience and expertise it has developed during the past decade. The data presented here suggest considerable variability across VISNs in the delivery of some PTSD services. It is the task of thoughtful planning, performance assessment, and clinical care to assure that, as VA passes through a period of major change during the years to come, the treatment provided to veterans with PTSD is equitably distributed, accessible, effective and, efficient.

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Treatment of Posttraumatic Stress Disorder in the Department of Veterans Affairs

In the decades since the end of the Vietnam conflict, the treatment of veterans suffering from war-related Posttraumatic Stress Disorder (PTSD) has become a major priority for the Department of Veterans Affairs (VA) Health Care System. With both clinical recognition and clear scientific demonstration that the effects of war zone trauma can be long lasting and severe (Wilson & Raphael, 1994; Kulka et al., 1990), VA has increasingly directed substantial clinical, educational, and research resources towards treatment of the only psychiatric illness directly related to war-zone experience.

For many thousands of veterans, PTSD is a chronic disorder resulting directly from their military service that causes substantial psychological suffering and social disability. The national network of specialized PTSD programs that has been established by VA is unique in the world. Studies have shown that veterans are very well pleased with the services received, significantly more so than they are with services from nonspecialized psychiatry programs (Fontana & Rosenheck, 1996a). The availability of specialized PTSD programs is an important indicator of the quality of health care provided by VA. At the close of FY 2003, VA's Specialized Outpatient PTSD Programs (SOPPs) totaled 107 clinical teams: 97 PTSD Clinical Teams (PCTs), 5 Substance Use PTSD Teams (SUPTs) and 5 Women's Stress Disorder Treatment Teams (WSDTTs). At the close of FY 2003, VA's Specialized Intensive PTSD Programs (SIPPs) consisted of 3 Evaluation and Brief Treatment Units (EBTPUs), 14 PTSD Residential Rehabilitation Programs (PRRPs), 7 PTSD Day Hospitals, 7 PTSD Domiciliary (PTSD Dom), 5 Specialized Inpatient PTSD Units (SIPUs), and 1 Women's Trauma Recovery Program (WTRP). The central mission of these teams as defined by Headquarters and the VA Special Committee on PTSD is to provide specialized PTSD treatment services to underserved veterans with PTSD due to military-related trauma.

Since 1988, the Northeast Program Evaluation Center, which also serves as the Evaluation Division of the National Center for PTSD, has been monitoring and evaluating the implementation and performance of specialized VA programs for the treatment of military-related PTSD under the auspices of VA's Strategic Health Care Group for Mental Health (Fontana, Rosenheck & Spencer, 1990, 1991, 1993; Fontana, Rosenheck, Spencer, & Gray, 1995-2003; Fontana & Rosenheck, 1994, 1996a; Rosenheck & Fontana, 1994a, 1994b, 1996).

Reorganization of the Veterans Health Administration (VHA)

In October 1995, the Veterans Health Administration (VHA) of VA underwent a major reorganization into 22 semi-autonomous Veterans Integrated Service Networks (VISNs) (Kizer, 1995). In 2002, VISNs 13 and 14 were combined to form VISN 23. All of the VISNs are charged with developing cost-effective health care programs that are responsive to both the national mission of the Department of Veterans Affairs and to local circumstances and trends in health care service delivery. The implementation of the VA reorganization, and the anticipation of possible budget reductions during the coming years, has stimulated a major review of VA health care programs (mental health programs among them) at the VAMC, VISN, and national levels. The shift of the locus of service from costly inpatient programs to more accessible

outpatient and community-based clinics has been identified as a national corporate goal and is emerging as a major goal of planning at the VISN level.

Organizational change is invariably a complex and difficult process. Clear, accurate and relevant data are essential to the success of such a process. In this summary report we have assembled a variety of types of information on the operation of VA's PTSD treatment programs to aid clinicians and administrators at various stages of planning for the future of VA treatment of PTSD.¹

Structure, Process and Outcome in the Evaluation of Health Care Service Delivery

The evaluation of health care systems has been conceptualized as assessing three dimensions of care: (1) structure, the resources needed to provide care, (2) process, the delivery of services, and (3) outcome, the impact of treatment on the well-being of patients (Donabedian, 1988). The data presented in sections I - III of this report primarily focus on structure and process of treatment and on population-based rates of service utilization. Outcome has been addressed extensively in previous and ongoing studies conducted at NEPEC, and in Part IV of this report. The first of these studies addressed the performance of VA's PTSD Clinical Teams in considerable breadth and depth (Fontana, Rosenheck & Spencer, 1990, 1991, 1993; Fontana, Rosenheck, Spencer, & Gray, 1995; Fontana & Rosenheck, 1996a). Evaluation data showed that the programs were serving their intended target population and that treatment was associated with significant improvement in PTSD symptoms and other life domains. Further, a major study of the cost and effectiveness of different approaches to inpatient PTSD treatment has been published (Fontana & Rosenheck, 1996a, 1997a; Rosenheck & Fontana, 1995b). In addition, a comprehensive outcome monitoring system was implemented in 1993 for specialized intensive PTSD treatment at 62 VA medical centers (Fontana & Rosenheck, 1997b). Currently, there are 37 specialized intensive PTSD programs.

A recent discussion of health care performance assessment in cardiac surgery in VA has refocused attention solely from the "tyranny of outcomes" (Berwick, 1988) to the fact that outcomes can only be influenced by changes in clinical process and clinical structures (Hammermeister et al., 1995). There is thus, substantial need for basic information on the structure and process of PTSD treatment, in addition to data on outcome performance. Issues of basic structure and program design are especially important since they have the greatest impact on total service costs. With anticipated reductions in Medicare and Medicaid funding and the growth of the number of Americans without health care coverage continuing at a rate of 1 million persons per year, VA will become the provider of last resort for an increasing number of veterans. This is especially true in the mental health area, in which major reductions in funding for State Mental Health Agencies have been under way for several years. It will be important to maximize the efficiency of service delivery if VA is to expand its treatment capacity to help the growing number of eligible veterans for whom it is the provider of last resort.

¹ This report is part of a larger effort to provide VA managers with data on performance in the mental health area and is part of a more general National Mental Health Program Performance Monitoring system that addresses the core aspects of VA mental health care, including both specialized and non-specialized programs (Greenberg & Rosenheck, 2003).

A national survey of veterans examined why veterans chose to use VA services and found that while 19.4% of VA system users reported low cost as the main reason, the second largest proportion (18.4%) chose VA because it "provided services not found elsewhere" (US Department of Veterans Affairs, 1995, p. 53). Several other studies have found that veterans with war zone service (Rosenheck & Massari, 1993) and, more specifically, Vietnam veterans with PTSD (Rosenheck & Fontana, 1995a) are significantly more likely to use VA rather than non-VA mental health services. VA services for PTSD are thus likely to be in high demand during the coming years and major efforts are needed to assure that services are available to the greatest extent possible.

PART I: AN OVERVIEW OF VA TREATMENT OF PTSD

Population Characteristics

Table 1 presents basic information on the population of veterans in each VISN, on the number of veterans eligible for VA services, the number and proportion who are service connected for a psychiatric disorder, and who are specifically service connected for PTSD. While there are substantial differences in the total veteran population in each VISN, differences in the proportions who are eligible for VA services or who are service connected are small to moderate. More detailed data on sociodemographic characteristics of veterans in each VISN are available in the report on the full mental health monitoring system (Greenberg & Rosenheck, 2003).

Additional data on the use of VA mental health services among all veterans and, more specifically, among those service-connected for PTSD are also presented in Table 1. Here, too, variations in population coverage between VISNs are modest, as evidenced by the small coefficients of variation (the standard deviation of the mean of all VISNs divided by the mean of all VISNs). Outlier values are defined as those that are 1 standard deviation or more below the mean of all VISNs, reflecting especially low population coverage, and are indicated by being framed in Table 1.²

Specialized Treatment Programs for PTSD in VA

The initial task for system planners is to identify the location and distribution of existing programs. VA programs that treat patients with PTSD can be divided into two types: general psychiatry programs and "specialized programs." General programs are standard VA inpatient and outpatient programs that treat veterans with PTSD in the same settings in which they treat veterans with other mental health problems. The "specialized programs" are staffed by experts who have concentrated their clinical work in the area of PTSD treatment. Such specialization has long been recognized as an essential feature in treatment of war-related PTSD. Treatment of PTSD requires specific familiarity with the kinds of trauma veterans encountered in various US wars, and special skills and experience to address the effects of these traumas.

Tables 2-3 present summary information on the number and types of specialized PTSD programs in each VISN and at each medical center. VISNs with especially small numbers of specialized programs are framed in Table 2. Table 2a shows changes from FY 2002- FY 2003 in the number of programs operating in each VISN. The change in number of programs shows a net loss of 1 PCT, 1 SUPT, 1 EBTPU, 2 PRRPs and 1 PTSD Day Hospital with a substance use unit (listed as "other"). Additional data on changes in program staffing are presented in Part III of this report. Table A1 in Appendix A shows changes from FY 1995 to FY 2003 in the number of programs operating in each VISN.

²One standard deviation is used as the criterion for identifying outliers throughout Part I. Since most comparisons reported here are one-tailed, one standard deviation or more identifies the extreme 15% of each distribution.

Tables 4-5 present data on FY 2003 expenditures by VISN and by each program. Fiscal data presented in Tables 4 and 5 reflect expenditure of special Congressionally appropriated funds along with locally generated funds for PTSD treatment as reported by each medical center in its Annual Specialized PTSD Report to NEPEC. These data are combined in Table 4 with population data to evaluate population-based per capita spending on specialized PTSD treatment in each VISN. While these funds account for the great majority of expenditures on specialized PTSD outpatient programs, they often constitute only part of the funding of inpatient, including residential, programs. Bolded/underlined values indicate VISNs that spend especially high proportions of special funds on inpatient care. Framed values reflect low per capita levels of funding.

In past reports, Table 6 presented data from VA's Cost Distribution report (CDR) on all VA expenditures for inpatient PTSD programs (including both locally allocated funds and funds allocated by a peer review process from special Congressionally appropriated funds). Although separate cost centers for these programs were initiated in FY 1994, many sites have not fully used these cost centers in their CDR distributions. As a result, substantial discrepancies have been observed in some instances between total funding as reported on the CDR, and total funding as reported in annual program reports to NEPEC. CDR data were presented in the Long Journey Home reports in the past, in part, to stimulate more careful reporting of expenditures in the proper cost accounts in the CDR. Unfortunately, incongruities between the CDR reports and the annual program reports continue to exist. For this reason, Table 6 is no longer included in the report.

Specialized PTSD Outpatient Programs

Tables 7 through 8 present summary data on the workload of specialized PTSD outpatient clinics: the PTSD Clinical Teams (PCT) program, the Substance Use PTSD Teams (SUPT) program, and the Women's Stress Disorder Treatment Teams (WSDTT) program. Table 7 presents basic information from computerized VA workload data (the outpatient file) on the number of veterans seen, the number of visits received, and the number of visits per veteran in each VISN. Data are also presented (Table 7a) on workload changes from FY 2002 to FY 2003. Overall these programs saw a 6.1% increase in veterans in FY 2003. The intensity of contact increased as evidenced by an increase of 2.6% in number of visits. Table A2 in Appendix A presents summary workload data and the changes from FY 1995 to FY 2003.

Table 8 presents workload data for specialized PTSD programs by medical center within each VISN. Teams that saw especially low numbers of veterans in FY 2003, or that delivered low intensity services, are framed.

Inpatient and Residential Treatment of PTSD

As noted above, inpatient treatment of PTSD in VA takes place in both specialized programs for PTSD and general psychiatry programs. In this section we first present data on inpatient and residential PTSD treatment overall, without differentiating various types of specialized programs. Data on specialized programs are presented subsequently.

Census Data. Tables 9 and 10 present data from the FY 2003 end-of-year national census of VA inpatients (conducted on patients hospitalized at midnight on September 30). Table 9 presents data on the number of occupied general psychiatry beds³ in each VISN and the number and proportion of beds occupied by patients whose primary diagnosis is PTSD (ICD-9 code 309.81). Data are also presented on the number of occupied domiciliary and PRRP beds in each VISN and the number and proportion of beds occupied by patients whose primary diagnosis is PTSD (ICD-9 code 309.81). Data on the length of stay are presented for these patients *up to the time of the census*.⁴ Since these are one-day cross-sectional data it should be borne in mind that they weight data from long-stay patients more heavily than data that averages care delivered during the entire year (e.g., the data presented in Tables 11, 11-2, 12, and 12-2). VISNs with especially long lengths of stay for PTSD (1 standard deviation above the mean of all VISNs) are signaled by bolding/underlining. Table 9 also presents population data on beds per capita among eligible veterans in the general population. VISNs with especially high numbers of beds per capita occupied by PTSD patients are bolded/underlined, while VISNs with especially low numbers of PTSD beds per capita are framed. While the advantage of census data is that they present information on occupied beds, the representativeness of a one-day sample is limited. Additional information is available, however, from the discharge abstract file -- the Patient Treatment File (PTF). Table 9a presents data on changes from FY 2002-FY 2003 in beds devoted to PTSD treatment. There was a 3.9% decline in the total number of general psychiatry beds in VA; a 6.9% increase in the proportion of general psychiatry beds used for PTSD treatment; and a 16.6% increase in average length of stay. There was an 6% decrease in the total number of domiciliary and PRRP beds in VA; a 1.3% increase in the proportion of domiciliary and PRRP beds used for PTSD treatment; and a 4.8% decrease in average length of stay. Additional data are presented in Table A3 in Appendix A.

Discharge Abstract Data. Tables 11 through 12-2 present data on all completed episodes of inpatient, domiciliary, and PRRP treatment in FY 2003. Data are presented on the total number of discharges for all diagnoses, and average length of stay⁵. In Table 11, the first four columns present data on the unique (unduplicated) veterans treated and their cumulative bed days of care during the year. The next two columns present the proportion of all episodes of care and the proportion of all unique veterans who received inpatient treatment for PTSD. VISNs treating especially low proportions of PTSD patients are indicated by framed values; however, for FY 2003 there were no outliers. The next series of columns present data on average length of stay, and cumulative days per veteran per year for PTSD treatment. VISNs with long stays and high bed days of care for inpatient utilization are marked by bolding/underlining.

³ Bed section codes 70-71, 75-79, 89 and 91-93. Domiciliary, PRRP and Hoptel care are not included.

⁴ These data are truncated at 365 days to reflect care delivered during FY 2003 only.

⁵ These measures are also truncated at 365 days, as are the cumulative bed days of care, described below. Very few PTSD patients have such long lengths of stay, minimizing censoring problems in these data.

The next pair of columns presents data on the *ratio* of average length of stay and cumulative bed days of care for PTSD to average length of stay and cumulative bed days of care for all general psychiatry patients. These ratios reflect systematic differences in patterns of inpatient care for PTSD as compared to inpatient care for all psychiatric disorders. High values are marked by bolding/underlining. Finally, Table 11-2 presents data on the number of episodes of PTSD treatment per Category A veteran in the general population, for each VISN. Equivalent data are presented by VAMC in Tables 12 and 12-2 (although population-based treatment estimates are not available for individual medical centers).

Tables 11a and 11b present data on the change from, FY 2002 to FY 2003, in the number and percent of patients receiving treatment for PTSD in general psychiatry inpatient beds and PRRP and domiciliary beds. VA provided a total of 6,823 episodes of inpatient treatment for PTSD in FY 2003 compared to 7,175 in FY 2002, a 4.9% decrease. The average length of stay of 15.6 in FY 2002 decreased slightly to 15.2 in FY 2003. A total of 3,766 episodes of domiciliary and PRRP treatment for PTSD was provided in FY 2003 compared to 3,736 in FY 2002, a 0.8% increase. Average length of stay increased from 57.7 in FY 2002 to 58.7 in FY 2003. Additional data are presented in Tables A4 and A5 in Appendix A.

Specialized Inpatient PTSD Programs

Tables 2 and 3 presented data on the distribution of five different types of inpatient and residential PTSD programs in VA; the Specialized Inpatient PTSD Unit (SIPU); the PTSD Domiciliary (PTSD Dom), the PTSD Day Hospital (PTSD DH), the PTSD Residential Rehabilitation Program (PRRP) and the Evaluation and Brief Treatment PTSD Unit (EBTPU). In this section we present additional information on these specialized programs from annual program summaries submitted to NEPEC.

As with Table 6, Table 13 is no longer being presented. Table 13 contained data on the number of operating beds and the number of admissions to specialized programs, based on data from annual report submissions to NEPEC. Additional data were presented from the CDR report of the current fiscal year. As noted with Table 6, many medical centers have not yet fully implemented procedures for accurately distributing costs to specific PTSD programs on the CDR. As this is case, Table 13 is not included in this report.

Performance Data on PTSD Treatment in VA

Tables 14-20 present performance assessment data on VA treatment of PTSD, by VISN and by VAMC. These data address both inpatient and outpatient care provided to an unduplicated sample of *all* veterans discharged from general psychiatry inpatient units (which include the specialized inpatient PTSD units) with a primary diagnosis of PTSD between October 1, 2002 and March 31, 2003.⁶ The monitors focus on service use and outcomes during

⁶ These data thus differ from those presented above in that they are based on a more intensively studied sample, which includes only veterans discharged during the first half of the fiscal year, about half of the unique veterans whose care was addressed in Tables 11-12.

the six months after the initial discharge. These measures are based on those used to evaluate performance in all VA mental health programs and are described more fully in VA's National Mental Health Program Performance Monitoring System (Greenberg & Rosenheck, 2003).

Inpatient Performance. Tables 14 and 15 present data on inpatient care, by VISN and by VAMC, that include:

- (1) the number of unduplicated veterans discharged with a diagnosis of PTSD,
- (2) the average length of stay of the index episode,
- (3) bed days of psychiatric care during the six months after discharge,
- (4) the change in bed days of psychiatric care from the six months before discharge to the six months after discharge,
- (5) the number of additional psychiatric hospital discharges during the six months after the index discharge,
- (6) readmission rates to general psychiatry bed sections at 14 days, 30 days and 180 days, after discharge, and
- (7) the number of days to first readmission among those readmitted to psychiatry bed sections.

Outlier performance is defined, for descriptive purposes, as any value that is 1 standard deviation or more from the mean of all VISNs (and all VAMCs, where indicated). Such outliers are identified in Tables 14 and 15 by framed values. A summary inpatient performance score for each VISN is derived by averaging the standard scores across all measures (see last column of Table 14).⁷

Outpatient Performance. Tables 16 and 17 present data on outpatient care among discharged veterans, by VISN and by VAMC, that include:

- (1) the proportion of discharged veterans who received any VA outpatient general psychiatric treatment during the 6 months following discharge,
- (2) the proportion of discharged veterans who received any VA outpatient general psychiatric treatment during the 30 days following discharge,

⁷These standard scores are z-scores, the site mean less the average of all site means divided by the standard deviation of all site means. Some measures are weighted more heavily in these averages than others, based on their importance and independence of other measures. Measures that address common factors (such as the readmission rates at 14, 30 and 180 days) are combined to form one measure in the overall average. For a full explanation of methods used for combining performance measures see Rosenheck & DiLella, 1998.

- (3) the number of days from discharge to the first general psychiatric visit during the six months after the index discharge, among those with at least one such visit,
- (4) the number of general psychiatric visits received by veterans who received at least one visit during the 6 months following discharge,
- (5) continuity of care, as measured by the number of two month periods (during the first six months after discharge) in which the veteran received two or more general psychiatry outpatient visits,
- (6) the proportion of veterans with a secondary diagnosis of alcohol or drug abuse in addition to their primary diagnosis of PTSD,
- (7) receipt of any substance abuse services during the six months following discharge,
- (8) the ratio of the proportion of veterans who received substance abuse treatment to the proportion who were dually diagnosed, and
- (9) the number of substance abuse outpatient services received during those six months among those who received any outpatient substance abuse services.⁸

Outlier performances are defined, as above, as a mean performance that is 1 standard deviation or more from the mean of all VISNs or all VAMCs and are identified in Tables 16 and 17 by framed values. As above, a summary outpatient performance score is derived by averaging the standard scores across all pertinent measures and is presented in the last column of Table 16 (see note 8, for details).

Outpatient Continuity of Care. Tables 16A-16B and Tables 17A-17B present a series of monitors that address continuity of care provided to outpatients with PTSD within the outpatient treatment setting. Thus, in contrast to the conventional HEDIS measures that evaluate the timeliness of entry into outpatient treatment following discharge from the hospital, these measures address continuity of care among patients with PTSD during the six months following their first outpatient visit in each fiscal year. These address the number of visits, the distribution of those visits across time, and the number of different providers involved. It is assumed that seriously mentally ill patients are best served by having regular contacts with the same provider over an extended period of time.

Continuity of care is widely regarded as a crucial ingredient in the treatment of patients with severe mental illness (Bachrach, 1981). A recent review of the literature on continuity of care for people with severe mental illness identified two broad components of continuity of care for such

⁸ General psychiatry outpatient visits (which include visits to specialized PTSD outpatient programs) are defined by outpatient file stop codes 501-506; 509-510; 515-516, 520-521, 525, 529, 531, 540-541; 550-554, 557-558; 561-563; 573-578; and 580-581. Substance abuse outpatient visits are defined by stop codes 507-508; 513-514; 517-519; 522-523; 555-556, 560.

patients: (1) a cross sectional component involving adequate communication between providers and access to a comprehensive array of needed services; and (2) a longitudinal component involving continuous contact over time, constancy of service providers, continuity through discharges and transfers and implementation of service plans (Johnson S. et al., 1997). We have developed a series of measures that specifically address several aspects of the longitudinal component of continuity of care.

The sample examined for this monitor includes all veterans who had at least two visits in a specialty outpatient clinic (500 series DSS identifier) in which the primary diagnosis was PTSD (ICD 9 code 309.81). Data were then compiled from the encounter forms on all mental health specialty visits and all unique providers seen by the veteran during the 6 months following the first contact of the year. These data were used to construct indicators that reflect: (1) the number of outpatient visits, (2) the number of different days on which the veteran had an outpatient visit; (3) the number of two-month periods in which the veteran had 2 or more visits (range 0-3); (4) the number of months in which the veteran had one mental health visit; and (5) whether the veteran concluded treatment, defined operationally as having no specialty mental health visits for 6 months. In addition two composite indices of continuity of care based on both the number of visits and the number of providers were constructed. The first of these measures, (6) the Continuity of Care (COC) index is based in the following formula developed by Bice and Boxerman (1977):

$$COC = \frac{\sum_{j=1}^s n_j^2 - n}{n(n-1)}$$

where n equals the total number of visits and n_j is the total visits to the j^{th} provider.

This measure generates a continuity of care score from 0-1, with one representing more visits with fewer providers and zero represents few visits with each of several providers.

The second index (7) is the Modified Modified Continuity Index (MMCI) developed by Magill and Senf (1987):

$$MMCI = \frac{1 - (n \text{ of providers} / [n \text{ of visits} + 0.1])}{1 - (1 / [n \text{ of visits} + 0.1])}$$

This index takes a somewhat different approach to calculating a measure based on a 0-1 scale in which one represents more visits with fewer providers and zero represents few visits with numerous providers. After risk adjustment for patient demographic and diagnostic characteristics, standardized scores of these seven measures are averaged to represent an overall index of continuity of care among seriously mentally ill VA outpatients receiving services from specialty mental health clinics.

Overall PTSD Performance Score

An overall PTSD performance score is presented in Table 18. This score averages the two summary outpatient scores (for which desirable performance is in the positive direction) from Table 16 and Table 16A, with the negative of the inpatient score presented in Table 14. The sign of the inpatient score is reversed because the direction of desirable performance on the inpatient summary score presented in Table 14 is in the negative direction. Positive scores on the overall inpatient and outpatient PTSD performance score thus reflect high outpatient service provision/outcome and low inpatient service provision/outcome while negative scores reflect the opposite -- high levels of inpatient utilization/outcome and readmission, and low outpatient service delivery -- a pattern which runs counter to VA corporate goals (Kizer, 1995).

Out-of-VISN Treatment

As a result of their specialized focus, PTSD programs sometimes treat patients who reside in other VISNs. Tables 19 and 20 present data on the proportion of veterans who received treatment for PTSD, and who resided in the VISN in which they were treated. For comparison, data are also presented on the proportion of such "in-VISN" veterans among those who were discharged from general psychiatry units but whose primary diagnosis was not PTSD, and among those who were discharged from substance abuse units.

Treatment of PTSD Inside and Outside of Specialized Programs

For ease of reference, Appendix E presents information regarding differentiation of treatment in different types of settings as specified in VHA Directive 2000-004, "Definition of Levels of Specialization in Post-Traumatic Stress Disorder (PTSD) Services". This directive delineates the types of outpatient PTSD services available in VA.

Appendix E Table E1 presents the total number of unique veterans with a primary diagnosis of PTSD receiving outpatient PTSD treatment in the VA system broken out by whether they received treatment in a specialized outpatient PTSD program, from a PTSD specialist, from a mental health program other than the above, or from a non-mental health program, by VISN, for FY 2003. Tables E2 and E3 present the total number of veterans who, regardless of primary diagnosis, received outpatient individual and group treatment from PTSD specialists by VISN and by facility, respectively, and the number of visits those veterans received, for FY 2003. Table E3 also indicates if a Specialized Outpatient PTSD Program (PCT, SUPT or WSDTT) was operating at each of those facilities during FY 2003.

Table 1. Veteran Population Characteristics and Use of VA Services: FY 2003

VISN	Total Vet Population 1990	Total Vet Population 2000	SC/Low Inc* 1990**	Percent SC/Low Inc* 1990** #	Service Connected Illness				Used VA MH Services		(%) SC Veterans Used VA MH Services	
					All Psych	(%) SC/Psych#	PTSD	(%)SC/PTSD#	All Vets	SC PTSD	Low Income	Of SC PTSD
1	1,500,892	1,327,933	358,094	23.9%	31,127	2.3%	12,608	0.9%	38,476	7,693	10.7%	61.0%
2	697,421	617,040	194,415	27.9%	12,109	2.0%	5,207	0.8%	20,311	3,315	10.4%	63.7%
3	1,595,593	1,230,989	335,211	21.0%	26,559	2.2%	9,603	0.8%	32,166	5,935	9.6%	61.8%
4	1,819,870	1,635,354	497,402	27.3%	27,168	1.7%	11,188	0.7%	39,122	7,019	7.9%	62.7%
5	857,564	827,066	168,218	19.6%	10,527	1.3%	4,358	0.5%	19,665	2,607	11.7%	59.8%
6	1,251,189	1,383,878	360,885	28.8%	24,915	1.8%	11,218	0.8%	37,671	6,982	10.4%	62.2%
7	1,367,528	1,501,145	399,439	29.2%	28,319	1.9%	13,595	0.9%	47,489	8,952	11.9%	65.8%
8	1,634,357	1,935,726	482,839	29.5%	43,845	2.3%	13,071	0.7%	69,662	8,410	14.4%	64.3%
9	1,060,416	1,099,248	367,654	34.7%	22,246	2.0%	10,084	0.9%	34,832	6,483	9.5%	64.3%
10	1,151,473	1,066,077	318,983	27.7%	16,148	1.5%	5,679	0.5%	36,155	3,553	11.3%	62.6%
11	1,651,186	1,533,351	427,356	25.9%	18,155	1.2%	5,905	0.4%	32,920	3,595	7.7%	60.9%
12	1,362,314	1,221,864	319,235	23.4%	15,222	1.2%	5,990	0.5%	30,281	3,778	9.5%	63.1%
15	1,071,604	1,030,765	329,293	30.7%	16,319	1.6%	7,490	0.7%	32,291	4,954	9.8%	66.1%
16	1,887,301	1,946,911	651,983	34.5%	43,744	2.2%	21,772	1.1%	70,169	12,898	10.8%	59.2%
17	1,026,699	1,092,479	321,378	31.3%	20,641	1.9%	10,250	0.9%	33,166	6,341	10.3%	61.9%
18	842,132	948,529	276,151	32.8%	19,385	2.0%	10,645	1.1%	33,879	6,765	12.3%	63.6%
19	731,842	799,369	215,445	29.4%	13,551	1.7%	7,296	0.9%	21,969	4,291	10.2%	58.8%
20	1,191,422	1,248,708	342,926	28.8%	26,164	2.1%	16,375	1.3%	38,890	9,111	11.3%	55.6%
21	1,418,772	1,280,265	338,504	23.9%	22,631	1.8%	13,136	1.0%	34,489	7,486	10.2%	57.0%
22	1,841,007	1,638,730	418,847	22.8%	23,600	1.4%	11,116	0.7%	45,107	6,162	10.8%	55.4%
23	1,223,080	1,184,277	363,908	29.8%	19,067	1.6%	8,523	0.7%	32,749	5,277	9.0%	61.9%
All VA	27,183,662	26,549,704	7,488,166	27.5%	481,442	1.8%	215,109	0.8%	781,459	131,607	10.4%	61.2%
Average	1,294,460	1,264,272	356,579	27.8%	22,926	1.8%	10,243	0.8%	37,212	6,267	10.5%	61.5%
SD	361,272	348,416	106,743	4.2%	8,880	0.3%	4,147	0.2%	12,882	2,432	1.5%	3.0%
CV	0.28	0.28	0.30	15.0%	0.39	19.2%	0.40	28.4%	0.35	0.39	14.2%	4.9%

Note: Outlined values are 1 SD below the mean of all VISNs and indicate VISNs with low population coverage.

* Service connected and Low-income veterans are not unduplicated.

** These data were not available for 2000.

Percentages based on total veteran population living in the VISN.

Table 2. SPECIALIZED PTSD PROGRAMS, BY VISN: FY 2003.

VISN	PCT	SUPT	WSDTT	EBTPU	PTSD DH	PTSD DOM	PRRP	SIPU	WTRP	SUM VISN
1	5	2	1	0	1	0	1	1	0	11
2	3	0	0	0	1	0	0	0	0	4
3	5	0	0	0	0	2	0	0	0	7
4	3	1	0	0	0	0	2	0	0	6
5	3	0	0	0	1	1	0	0	0	5
6	5	0	0	0	0	0	0	2	0	7
7	6	0	0	0	0	0	0	0	0	6
8	5	0	0	0	0	1	1	0	0	7
9	5	0	0	0	0	0	0	0	0	5
10	5	0	1	0	3	0	0	0	0	9
11	5	0	0	0	0	0	1	0	0	6
12	2	0	1	0	0	1	2	0	0	6
15	5	0	0	0	0	0	0	1	0	6
16	7	0	1	0	0	1	2	0	0	11
17	5	0	0	0	0	0	1	0	0	6
18	4	0	0	1	0	0	0	0	0	5
19	4	0	0	0	1	0	0	0	0	5
20	4	0	0	2	0	1	0	1	0	8
21	4	1	0	0	0	0	2	0	1	8
22	5	0	1	0	0	0	0	0	0	6
23	7	1	0	0	0	0	2	0	0	10
ALL VA	97	5	5	3	7	7	14	5	1	144
AVERAGE	5	0	0	0	0	0	1	0	0	7
SD	1.24	0.54	0.44	0.48	0.73	0.58	0.86	0.54	0.22	1.98

Note: Outlined values are 1 SD below the mean of all VISNs, and indicate VISNs with low numbers of Specialized PTSD programs.

Legend:

PCT = PTSD Clinical Team

SUPT = Substance Use PTSD Team

WSDTT = Women's Stress Disorder Treatment Team

EBTPU = Evaluation & Brief Treatment Unit

PTSD DH = PTSD Day Hospital

PTSD DOM = PTSD Domiciliary

PRRP = PTSD Residential Rehabilitation Program

SIPU = Specialized PTSD Inpatient Unit

WTRP= Women's Trauma Recovery Program

Table 2a. VA SPECIALIZED PTSD PROGRAMS BY VISN: FY 2002, FY 2003 and FY 2003-2002 change.

Fiscal Year 2003											
VISN	PCT	SUPT	WSDTT	EBTPU	PTSD DH	PTSD DOM	PRRP	SIPU	WTRP	OTHER	SUM VISN
1	5	2	1	0	1	0	1	1	0	0	11
2	3	0	0	0	1	0	0	0	0	0	4
3	5	0	0	0	0	2	0	0	0	0	7
4	3	1	0	0	0	0	2	0	0	0	6
5	3	0	0	0	1	1	0	0	0	0	5
6	5	0	0	0	0	0	0	2	0	0	7
7	6	0	0	0	0	0	0	0	0	0	6
8	5	0	0	0	0	1	1	0	0	0	7
9	5	0	0	0	0	0	0	0	0	0	5
10	5	0	1	0	3	0	0	0	0	0	9
11	5	0	0	0	0	0	1	0	0	0	6
12	2	0	1	0	0	1	2	0	0	0	6
15	5	0	0	0	0	0	0	1	0	0	6
16	7	0	1	0	0	1	2	0	0	0	11
17	5	0	0	0	0	0	1	0	0	0	6
18	4	0	0	1	0	0	0	0	0	0	5
19	4	0	0	0	1	0	0	0	0	0	5
20	4	0	0	2	0	1	0	1	0	0	8
21	4	1	0	0	0	0	2	0	1	0	8
22	5	0	1	0	0	0	0	0	0	0	6
23	7	1	0	0	0	0	2	0	0	0	10
ALL VA	97	5	5	3	7	7	14	5	1	0	144
AVERAGE	5	0	0	0	0	0	1	0	0	0	7
SD	1.24	0.54	0.44	0.48	0.73	0.58	0.86	0.54	0.22	0.00	1.98

Fiscal Year 2002											
VISN	PCT	SUPT	WSDTT	EBTPU	PTSD DH	PTSD DOM	PRRP	SIPU	WTRP	OTHER	SUM VISN
1	6	2	1	0	2	0	1	1	0	0	13
2	3	0	0	0	0	0	1	0	0	0	4
3	5	0	0	0	0	2	0	0	0	0	7
4	3	1	0	0	0	0	2	0	0	0	6
5	3	0	0	0	0	1	1	0	0	0	5
6	5	0	0	0	0	0	0	2	0	0	7
7	7	0	0	0	1	0	0	0	0	0	8
8	4	1	0	0	0	1	1	0	0	0	7
9	5	0	0	0	0	0	0	0	0	0	5
10	5	0	1	0	3	0	0	0	0	1	10
11	5	0	0	0	0	0	1	0	0	0	6
12	2	0	1	0	0	1	2	0	0	0	6
15	5	0	0	0	0	0	0	1	0	0	6
16	7	0	1	1	0	1	2	0	0	0	12
17	5	0	0	0	0	0	1	0	0	0	6
18	4	0	0	1	0	0	0	0	0	0	5
19	4	0	0	0	1	0	0	0	0	0	5
20	4	0	0	2	0	1	0	1	0	0	8
21	4	1	0	0	0	0	2	0	1	0	8
22	5	0	1	0	0	0	0	0	0	0	6
23	7	1	0	0	0	0	2	0	0	0	10
ALL VA	98	6	5	4	7	7	16	5	1	1	150
AVERAGE	5	0	0	0	0	0	1	0	0	0	7
SD	1.35	0.56	0.44	0.51	0.80	0.58	0.83	0.54	0.22	0.22	2.37

Change in Number of Programs											
VISN	PCT	SUPT	WSDTT	EBTPU	PTSD DH	PTSD DOM	PRRP	SIPU	WTRP	OTHER	SUM VISN
1	-1	0	0	0	-1	0	0	0	0	0	-2
2	0	0	0	0	1	0	-1	0	0	0	0
3	0	0	0	0	0	0	0	0	0	0	0
4	0	0	0	0	0	0	0	0	0	0	0
5	0	0	0	0	1	0	-1	0	0	0	0
6	0	0	0	0	0	0	0	0	0	0	0
7	-1	0	0	0	-1	0	0	0	0	0	-2
8	1	-1	0	0	0	0	0	0	0	0	0
9	0	0	0	0	0	0	0	0	0	0	0
10	0	0	0	0	0	0	0	0	0	-1	-1
11	0	0	0	0	0	0	0	0	0	0	0
12	0	0	0	0	0	0	0	0	0	0	0
15	0	0	0	0	0	0	0	0	0	0	0
16	0	0	0	-1	0	0	0	0	0	0	-1
17	0	0	0	0	0	0	0	0	0	0	0
18	0	0	0	0	0	0	0	0	0	0	0
19	0	0	0	0	0	0	0	0	0	0	0
20	0	0	0	0	0	0	0	0	0	0	0
21	0	0	0	0	0	0	0	0	0	0	0
22	0	0	0	0	0	0	0	0	0	0	0
23	0	0	0	0	0	0	0	0	0	0	0
ALL VA	-1	-1	0	-1	0	0	-2	0	0	-1	-6

Table 3. VA SPECIALIZED PTSD PROGRAMS: FY 2003: PROGRAM COUNTS BY VAMC.

[illegible]

Table 3. VA SPECIALIZED PTSD PROGRAMS: FY 2003: PROGRAM COUNTS BY VAMC.

VISN	FACILITY	STATION NUMBER	PCT	SUPT	WSDTT	EBTPU	PTSD DH	PTSD DOM	PRRP	SIPU	WTRP	OTHER	SUM VAMC
9	Huntington	581	1										1
9	Lexington	596	1										1
9	Louisville	603	1										1
9	Memphis	614	1										1
9	Mountain Home	621	1										1
10	Brecksville	541	1		1		1					1*	3
10	Chillicothe	538	1										1
10	Cincinnati	539	1				1						2
10	Columbus	757	1										1
10	Dayton	552	1				1						2
11	Ann Arbor HCS	506	1										1
11	Battle Creek	515	1						1				2
11	Danville	550	1										1
11	Northern Indiana HCS	610/610A4	2										2
12	Chicago HCS	537	1										1
12	Hines	578	1										1
12	Madison	607			1								1
12	Milwaukee	695						1					1
12	North Chicago	556							1				1
12	Tomah	676							1				1
15	Eastern Kansas HCS	589A5	1							1			2
15	Kansas City	589	1										1
15	Poplar Bluff	657A4	1										1
15	St. Louis	657	1										1
15	Wichita	589A7	1										1
16	Central Arkansas Veterans HCS	598	1					1					2
16	Fayetteville (AR)	564	1										1
16	Gulf Coast Veterans HCS	520	1										1
16	Houston	580	1										1
16	Jackson	586	1			1*			1				2
16	New Orleans	629	1		1				1				3
16	Oklahoma City	635	1										1
17	Central Texas Veterans HCS	674	3						1				4
17	North Texas HCS	549	1										1
17	South Texas Veterans HCS	671	1										1
18	El Paso Veterans HCS	756	1										1
18	New Mexico HCS	501	1										1
18	Phoenix	644	1										1
18	Southern Arizona HCS	678	1			1							2

Table 3. VA SPECIALIZED PTSD PROGRAMS: FY 2003: PROGRAM COUNTS BY VAMC.

VISN	FACILITY	STATION NUMBER	PCT	SUPT	WSDTT	EBTPU	PTSD DH	PTSD DOM	PRRP	SIPU	WTRP	OTHER	SUM VAMC
19	Cheyenne	442	1										1
19	Denver	554					1						1
19	Grand Junction	575	1										1
19	Southern Colorado HCS	554GD	1										1
19	Salt Lake City HCS	660	1										1
20	Boise	531	1			1							2
20	Portland	648	1										1
20	Puget Sound HCS	663	1			1		1					3
20	Roseburg HCS	653								1			1
20	Spokane	668	1										1
21	Hilo	459GB							1				1
21	Honolulu	459	1										1
21	Northern California HCS	612	1										1
21	Palo Alto HCS	640	1						1		1		3
21	San Francisco	662	1	1									2
22	Greater Los Angeles HCS	691	2										2
22	Loma Linda	605	1		1								2
22	San Diego HCS	664	1										1
22	Southern NV HCS	593	1										1
23	Black Hills HCS	568	1	1					1				3
23	Central Iowa HCS	636A6/A7	1						1				2
23	Iowa City	636A8	1										1
23	Minneapolis	618	1										1
23	Nebraska-Western Iowa HCS	636/636A5	2										2
23	Sioux Falls	438	1										1

Note: "OTHER" refers to a Specialized Intensive PTSD Program with a substance abuse unit.

* This program closed in FY 2003.

Table 4. SUMMARY OF NATIONALLY ALLOCATED EXPENDITURES FOR SPECIALIZED PTSD PROGRAMS, By VISN, FY 2003.

	Specialized Program FY 2003 Expenditures †				% Intensive/	Total Vet	Total Vet	SC/Low Inc	Expenditures Per SC/Low Income Veteran**		
VISN	Outpatient	Intensive	Total	Outpatient	Population	Population	1990*	Outpatient	Intensive	Total	
1	\$2,991,176	\$1,081,562	\$4,072,737	26.6%	1,500,892	1,327,933	358,094	\$8.35	\$3.02	\$11.37	
2	\$1,032,536	\$583,074	\$1,615,609	36.1%	697,421	617,040	194,415	\$5.31	\$3.00	\$8.31	
3	\$2,450,224	\$1,600,222	\$4,050,446	39.5%	1,595,593	1,230,989	335,211	\$7.31	\$4.77	\$12.08	
4	\$2,699,270	\$1,989,669	\$4,688,940	42.4%	1,819,870	1,635,354	497,402	\$5.43	\$4.00	\$9.43	
5	\$923,552	\$749,008	\$1,672,561	44.8%	857,564	827,066	168,218	\$5.49	\$4.45	\$9.94	
6	\$1,773,269	\$2,014,474	\$3,787,743	53.2%	1,251,189	1,383,878	360,885	\$4.91	\$5.58	\$10.50	
7	\$3,256,244	\$0	\$3,256,244	0.0%	1,367,528	1,501,145	399,439	\$8.15	\$0.00	\$8.15	
8	\$2,344,695	\$996,023	\$3,340,718	29.8%	1,634,357	1,935,726	482,839	\$4.86	\$2.06	\$6.92	
9	\$1,598,079	\$0	\$1,598,079	NA	1,060,416	1,099,248	367,654	\$4.35	\$0.00	\$4.35	
10	\$3,483,876	\$1,006,006	\$4,489,881	22.4%	1,151,473	1,066,077	318,983	\$10.92	\$3.15	\$14.08	
11	\$1,545,928	\$993,261	\$2,539,189	39.1%	1,651,186	1,533,351	427,356	\$3.62	\$2.32	\$5.94	
12	\$1,313,692	\$1,599,025	\$2,912,717	54.9%	1,362,314	1,221,864	319,235	\$4.12	\$5.01	\$9.12	
15	\$1,977,735	\$1,075,900	\$3,053,635	35.2%	1,071,604	1,030,765	329,293	\$6.01	\$3.27	\$9.27	
16	\$5,741,655	\$1,553,326	\$7,294,980	21.3%	1,887,301	1,946,911	651,983	\$8.81	\$2.38	\$11.19	
17	\$2,300,938	\$1,134,651	\$3,435,588	33.0%	1,026,699	1,092,479	321,378	\$7.16	\$3.53	\$10.69	
18	\$2,208,428	\$346,501	\$2,554,929	13.6%	842,132	948,529	276,151	\$8.00	\$1.25	\$9.25	
19	\$1,517,454	\$574,083	\$2,091,537	27.4%	731,842	799,369	215,445	\$7.04	\$2.66	\$9.71	
20	\$3,389,449	\$2,471,444	\$5,860,893	42.2%	1,191,422	1,248,708	342,926	\$9.88	\$7.21	\$17.09	
21	\$2,850,148	\$3,141,988	\$5,992,137	52.4%	1,418,772	1,280,265	338,504	\$8.42	\$9.28	\$17.70	
22	\$2,687,215	\$0	\$2,687,215	NA	1,841,007	1,638,730	418,847	\$6.42	\$0.00	\$6.42	
23	\$2,827,452	\$484,069	\$3,311,521	14.6%	1,223,080	1,184,277	363,908	\$7.77	\$1.33	\$9.10	
ALL VA	\$50,913,014	\$23,394,284	\$74,307,298	31.5%	27,183,662	26,549,704	7,488,166	\$6.80	\$3.12	\$9.92	
AVERAGE	\$2,424,429	\$1,114,014	\$3,538,443	33.1%	1,294,460	1,264,272	356,579	\$6.78	\$3.25	\$10.03	
SD	\$1,071,272	\$826,325	\$1,498,328	14.5%	361,272	348,416	106,743	\$1.97	\$2.32	\$3.28	
CV	0.44	0.74	0.42	0.44	0.28	0.28	0.30	0.29	0.71	0.33	

Note: No specialized Intensive PTSD Program was opened in VISNs 7, 9 or 22 for this time period.

† Expenditures = "All Other dollars" plus total salary dollars for both centrally-funded and station-funded FTEE as reported in the FY 2003 Annual Report for Specialized Programs.

* These data were not available for 2000.

** Bolded/underlined values are 1 SD above the mean of all VISNs; outlined values are 1 SD below the mean.

NA=Not Applicable

Table 5. SUMMARY OF NATIONALLY ALLOCATED EXPENDITURES FOR SPECIALIZED PTSD PROGRAMS, BY VAMC, OPEN IN FY 2003.

[illegible]

[illegible]

Table 5. SUMMARY OF NATIONALLY ALLOCATED EXPENDITURES FOR SPECIALIZED PTSD PROGRAMS, By VAMC, OPEN IN FY 2003.

VISN STATION	PCT	SUPT	WSDTT	PTSDDH	EBTPU	PRRP	PTSDDOM	SIPU	WTRP	SUM VAMC
17 CENTRAL TX VETERANS HCS: Austin	\$303,447									\$303,447
17 CENTRAL TX VETERANS HCS: Temple	\$245,171									\$245,171
17 CENTRAL TX VETERANS HCS: Waco	\$263,980					\$1,134,651				\$1,398,631
17 NORTH TX HCS: Dallas	\$681,883									\$681,883
17 SOUTH TX VETERANS HCS: San Antonio	\$806,456									\$806,456
18 EL PASO (TX) VETERANS HCS	\$453,493									\$453,493
18 NEW MEXICO HCS (Albuquerque)	\$964,361									\$964,361
18 PHOENIX, AZ	\$461,293									\$461,293
18 SOUTHERN AZ HCS (Tucson)	\$329,281				\$346,501					\$675,782
19 CHEYENNE, WY	\$188,076									\$188,076
19 EASTERN COLORADO HCS: Denver				\$574,083						\$574,083
19 EASTERN COLORADO: Pueblo	\$119,969									\$119,969
19 GRAND JUNCTION, CO	\$389,775									\$389,775
19 SALT LAKE CITY (UT) HCS	\$819,634									\$819,634
20 BOISE, ID	\$484,188				\$386,811					\$870,999
20 PORTLAND, OR	\$835,068									\$835,068
20 PUGET SOUND (WA) HCS: American Lake							\$563,640			\$563,640
20 PUGET SOUND (WA) HCS: Seattle	\$1,851,377				\$1,057,501					\$2,908,878
20 ROSEBURG (OR) HCS								\$463,491		\$463,491
20 SPOKANE, WA	\$218,817									\$218,817
21 HILO, HI						\$816,386				\$816,386
21 HONOLULU, HI	\$536,907									\$536,907
21 NORTHERN CA HCS	\$263,896									\$263,896
21 PALO ALTO (CA) HCS: Menlo Park						\$1,950,005			\$375,598	\$2,325,603
21 PALO ALTO (CA) HCS: San Jose	\$237,744									\$237,744
21 SAN FRANCISCO, CA	\$1,321,279	\$490,322								\$1,811,600
22 GREATER LOS ANGELES (CA) HCS: East LA	\$429,602									\$429,602
22 GREATER LOS ANGELES (CA) HCS: West LA	\$831,825									\$831,825
22 LOMA LINDA, CA	\$193,417			\$275,083						\$468,500
22 SAN DIEGO (CA) HCS CA	\$526,752									\$526,752
22 SOUTHERN NV HCS (Las Vegas)	\$430,535									\$430,535
23 BLACK HILLS (SD) HCS: Fort Meade		\$449,798								\$449,798
23 BLACK HILLS (SD) HCS: Hot Springs						\$306,806				\$306,806
23 CENTRAL IA HCS: Des Moines						\$177,263				\$177,263
23 CENTRAL IA HCS: Knoxville	\$93,540									\$93,540
23 IOWA CITY, IA	\$410,125									\$410,125
23 MINNEAPOLIS, MN	\$1,041,410									\$1,041,410
23 NE-WESTERN IA HCS: Lincoln	\$267,714									\$267,714
23 NE-WESTERN IA HCS: Omaha	\$406,998									\$406,998
23 SIOUX FALLS, SD	\$157,867									\$157,867

Data for TABLE 6 are not available for this fiscal year.
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Table 7. INTENSITY DATA: SOPPs by VISN: FY 2003

SOPPs WORKLOAD				Total Vet Population	Eligible for VA Services**	All VA MH Service Users	Population-Based Workload*	
VISN	Veterans Seen	Visits	Vis/Vet*				Per 1,000 Elig.	Pct. MH Users
1	4,068	48,710	11.97	1,500,892	358,094	38,476	11.36	10.6%
2	992	10,519	10.60	697,421	194,415	20,311	5.10	4.9%
3	3,162	39,496	12.49	1,595,593	335,211	32,166	9.43	9.8%
4	2,997	24,327	8.12	1,819,870	497,402	39,122	6.03	7.7%
5	2,174	21,308	9.80	857,564	168,218	19,665	12.92	11.1%
6	3,622	24,963	6.89	1,251,189	360,885	37,671	10.04	9.6%
7	4,359	37,963	8.71	1,367,528	399,439	47,489	10.91	9.2%
8	3,635	27,133	7.46	1,634,357	482,839	69,662	7.53	5.2%
9	3,076	17,307	5.63	1,060,416	367,654	34,832	8.37	8.8%
10	2,961	26,012	8.78	1,151,473	318,983	36,155	9.28	8.2%
11	2,134	17,861	8.37	1,651,186	427,356	32,920	4.99	6.5%
12	1,089	12,681	11.64	1,362,314	319,235	30,281	3.41	3.6%
15	2,879	29,780	10.34	1,071,604	329,293	32,291	8.74	8.9%
16	9,531	82,865	8.69	1,887,301	651,983	70,169	14.62	13.6%
17	3,124	26,690	8.54	1,026,699	321,378	33,166	9.72	9.4%
18	4,066	31,387	7.72	842,132	276,151	33,879	14.72	12.0%
19	2,402	16,396	6.83	731,842	215,445	21,969	11.15	10.9%
20	5,306	50,175	9.46	1,191,422	342,926	38,890	15.47	13.6%
21	2,952	34,827	11.80	1,418,772	338,504	34,489	8.72	8.6%
22	4,051	36,855	9.10	1,841,007	418,847	45,107	9.67	9.0%
23	3,254	28,640	8.80	1,223,080	363,908	32,749	8.94	9.9%
ALL VA	71,538	645,895	9.03	25,960,582	7,124,258	781,459	10.04	9.2%
AVERAGE	3,421	30,757	9.13	1,294,460	356,579	37,212	9.58	9.1%
SD	1,730	15,982	1.83	361,272	106,743	12,882	3.20	2.6%
CV	0.51	0.52	0.20	0.28	0.30	0.35	0.33	0.28

* Outlined values are 1 SD below the mean of all VISNs and reflect low intensity and low population coverage in outpatient specialized PTSD service delivery.

** These data were not available for 2000.

Table 7a. INTENSITY DATA: SOPPs by VISN: FY 2002, FY 2003 and FY 2003-2002 change.

VISN	FY 2002			FY 2003			% Change: FY 2003- FY 2002		
	SOPP WORKLOAD			SOPP WORKLOAD			SOPP WORKLOAD		
	Veterans Seen	Visits	Vis/Vet	Veterans Seen	Visits	Vis/Vet*	Veterans	Visits	Vis/Vet
1	4,231	48,690	11.51	4,068	48,710	11.97	-3.9%	0.0%	4.0%
2	1,065	10,649	10.00	992	10,519	10.60	-6.9%	-1.2%	6.0%
3	2,969	40,605	13.68	3,162	39,496	12.49	6.5%	-2.7%	-8.7%
4	2,874	22,965	7.99	2,997	24,327	8.12	4.3%	5.9%	1.6%
5	2,259	20,497	9.07	2,174	21,308	9.80	-3.8%	4.0%	8.0%
6	3,318	23,781	7.17	3,622	24,963	6.89	9.2%	5.0%	-3.8%
7	4,339	39,869	9.19	4,359	37,963	8.71	0.5%	-4.8%	-5.2%
8	3,177	24,911	7.84	3,635	27,133	7.46	14.4%	8.9%	-4.8%
9	2,575	15,175	5.89	3,076	17,307	5.63	19.5%	14.0%	-4.5%
10	3,044	28,068	9.22	2,961	26,012	8.78	-2.7%	-7.3%	-4.7%
11	2,084	17,558	8.43	2,134	17,861	8.37	2.4%	1.7%	-0.7%
12	1,014	12,322	12.15	1,089	12,681	11.64	7.4%	2.9%	-4.2%
15	2,738	30,221	11.04	2,879	29,780	10.34	5.1%	-1.5%	-6.3%
16	8,230	74,253	9.02	9,531	82,865	8.69	15.8%	11.6%	-3.6%
17	2,969	28,349	9.55	3,124	26,690	8.54	5.2%	-5.9%	-10.5%
18	3,629	29,913	8.24	4,066	31,387	7.72	12.0%	4.9%	-6.3%
19	2,574	16,722	6.50	2,402	16,396	6.83	-6.7%	-1.9%	5.1%
20	5,252	50,279	9.57	5,306	50,175	9.46	1.0%	-0.2%	-1.2%
21	2,691	31,720	11.79	2,952	34,827	11.80	9.7%	9.8%	0.1%
22	3,731	34,341	9.20	4,051	36,855	9.10	8.6%	7.3%	-1.2%
23	2,975	28,515	9.58	3,254	28,640	8.80	9.4%	0.4%	-8.2%
ALL VA	67,449	629,403	9.33	71,538	645,895	9.03	6.1%	2.6%	-3.2%
AVERAGE	3,226	29,972	9.36	3,421	30,757	9.13	5.1%	2.4%	-2.3%
SD	1,506	14,835	1.90	1,730	15,982	1.83	7.3%	5.8%	5.0%
CV	0.47	0.49	0.20	0.51	0.52	0.20	1.44	2.39	-2.15

Table 8. INTENSITY DATA: SOPPs By INDIVIDUAL PROGRAM, FY 2003.

VISN	FACILITY	PROGRAM	FY 2003		VISITS/ VETERANS*
			# VISITS	# VETS SEEN	
1	BOSTON (MA) HCS: Boston	PCT	7,030	645	10.90
1	BOSTON (MA) HCS: Boston	WSDTT	3,799	265	14.34
1	BOSTON (MA) HCS: Brockton	PCT	5,454	493	11.06
1	BOSTON (MA) HCS: Brockton	SUPT	792	121	6.55
1	CONNECTICUT HCS: West Haven	PCT	11,043	779	14.18
1	CONNECTICUT HCS: West Haven	SUPT	2,972	289	10.28
1	MANCHESTER, NH	PCT	2,684	232	11.57
1	PROVIDENCE, RI	PCT	11,950	1,099	10.87
1	WHITE RIVER JUNCTION, VT	PCT	2,986	424	7.04
2	CANANDAIGUA, NY	PCT	4,600	366	12.57
2	SYRACUSE, NY	PCT	2,500	315	7.94
2	WESTERN NY HCS: Batavia	PCT	3,419	328	10.42
3	BRONX, NY	PCT	11,823	608	19.45
3	HUDSON VALLEY (NY) HCS: Castle Point	PCT	1,756	219	8.02
3	NEW JERSEY HCS: East Orange	PCT	4,428	511	8.67
3	NEW YORK HARBOR HCS: Brooklyn	PCT	9,166	985	9.31
3	NEW YORK HARBOR HCS: New York	PCT	12,323	867	14.21
4	COATESVILLE, PA	PCT	5,746	577	9.96
4	PHILADELPHIA, PA	PCT	9,748	1,264	7.71
4	PITTSBURGH (PA) HCS: Highland Drive	PCT	6,095	885	6.89
4	PITTSBURGH (PA) HCS: Highland Drive	SUPT	2,738	297	9.22
5	MARYLAND HCS: Baltimore	PCT	6,940	625	11.10
5	MARYLAND HCS: Perry Point	PCT	4,867	566	8.60
5	WASHINGTON, DC	PCT	9,501	1,072	8.86
6	ASHEVILLE, NC	PCT	3,662	301	12.17
6	DURHAM, NC	PCT	4,428	1,128	3.93
6	FAYETTEVILLE, NC	PCT	5,101	322	15.84
6	HAMPTON, VA	PCT	8,587	1,125	7.63
6	SALISBURY, NC	PCT	3,185	774	4.11
7	ATLANTA, GA	PCT	6,082	656	9.27
7	AUGUSTA, GA	PCT	11,668	1,135	10.28
7	BIRMINGHAM, AL	PCT	3,525	953	3.70
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	5,826	547	10.65
7	CHARLESTON, SC	PCT	4,069	557	7.31
7	DUBLIN, GA	PCT	6,793	542	12.53
8	BAY PINES, FL	PCT	6,462	1,170	5.52
8	MIAMI, FL	PCT	5,608	480	11.68
8	NO.FL/SO.GA VETERANS HCS: Gainesville	PCT	5,187	594	8.73
8	SAN JUAN, PR	PCT	3,295	534	6.17
8	TAMPA, FL	PCT	6,581	873	7.54
9	HUNTINGTON, WV	PCT	1,679	612	2.74
9	LEXINGTON, KY	PCT	3,818	291	13.12
9	LOUISVILLE, KY	PCT	1,622	378	4.29
9	MEMPHIS, TN	PCT	4,628	740	6.25
9	MOUNTAIN HOME, TN	PCT	5,560	1,055	5.27
10	BRECKSVILLE, OH	PCT	11,276	900	12.53
10	BRECKSVILLE, OH	WSDTT	1,462	136	10.75
10	CHILLICOTHE, OH	PCT	3,349	731	4.58
10	CINCINNATI, OH	PCT	5,971	678	8.81
10	COLUMBUS, OH	PCT	2,218	389	5.70
10	DAYTON, OH	PCT	1,736	251	6.92

Table 8. INTENSITY DATA: SOPPs By INDIVIDUAL PROGRAM, FY 2003.

VISN	FACILITY	PROGRAM	FY 2003		VISITS/ VETERANS*
			# VISITS	# VETS SEEN	
11	ANN ARBOR (MI) HCS	PCT	3,596	339	10.61
11	BATTLE CREEK, MI	PCT	6,577	824	7.98
11	DANVILLE, IL	PCT	2,697	424	6.36
11	NORTHERN IN HCS: Fort Wayne	PCT	958	157	6.10
11	NORTHERN IN HCS: Marion	PCT	4,033	428	9.42
12	CHICAGO (IL) HCS: West Side	PCT	8,753	579	15.12
12	HINES, IL	PCT	1,654	246	6.72
12	MADISON, WI	WSDTT	2,274	266	8.55
15	EASTERN KS HCS: Topeka	PCT	8,827	498	17.72
15	KANSAS CITY, MO	PCT	5,221	721	7.24
15	POPLAR BLUFF, MO	PCT	2,180	343	6.36
15	ST. LOUIS, MO	PCT	9,351	994	9.41
15	WICHITA, KS	PCT	4,201	330	12.73
16	CENTRAL AR VETERANS HCS (Little Rock)	PCT	7,098	1,563	4.54
16	FAYETTEVILLE, AR	PCT	3,456	970	3.56
16	GULF COAST (MS) VETERANS HCS (Biloxi)	PCT	10,226	1,150	8.89
16	HOUSTON, TX	PCT	20,168	2,132	9.46
16	JACKSON, MS	PCT	5,458	958	5.70
16	NEW ORLEANS, LA	PCT	24,460	2,130	11.48
16	NEW ORLEANS, LA	WSDTT	643	86	7.48
16	OKLAHOMA CITY, OK	PCT	11,356	645	17.61
17	CENTRAL TX VETERANS HCS: Austin	PCT	3,441	435	7.91
17	CENTRAL TX VETERANS HCS: Temple	PCT	4,443	432	10.28
17	CENTRAL TX VETERANS HCS: Waco	PCT	4,113	420	9.79
17	NORTH TX HCS: Dallas	PCT	7,930	549	14.44
17	SOUTH TX VETERANS HCS: San Antonio	PCT	6,763	1,330	5.08
18	EL PASO (TX) VETERANS HCS	PCT	6,222	788	7.90
18	NEW MEXICO HCS (Albuquerque)	PCT	13,416	1,781	7.53
18	PHOENIX, AZ	PCT	6,036	612	9.86
18	SOUTHERN AZ HCS (Tucson)	PCT	5,713	895	6.38
19	CHEYENNE, WY	PCT	1,861	248	7.50
19	EASTERN COLORADO: Pueblo	PCT	2,500	494	5.06
19	GRAND JUNCTION, CO	PCT	2,262	392	5.77
19	SALT LAKE CITY (UT) HCS	PCT	9,773	1,270	7.70
20	BOISE, ID	PCT	3,195	353	9.05
20	PORTLAND, OR	PCT	10,137	1,141	8.88
20	PUGET SOUND (WA) HCS: Seattle	PCT	32,943	3,441	9.57
20	SPOKANE, WA	PCT	3,900	461	8.46
21	HONOLULU, HI	PCT	6,856	521	13.16
21	NORTHERN CA HCS	PCT	1,089	273	3.99
21	PALO ALTO (CA) HCS: San Jose	PCT	10,181	724	14.06
21	SAN FRANCISCO, CA	PCT	12,242	1,244	9.84
21	SAN FRANCISCO, CA	SUPT	4,459	224	19.91
22	GREATER LOS ANGELES (CA) HCS: East LA	PCT	6,488	640	10.14
22	GREATER LOS ANGELES (CA) HCS: West LA	PCT	1,999	514	3.89
22	LOMA LINDA, CA	PCT	3,363	285	11.80
22	LOMA LINDA, CA	WSDTT	1,934	291	6.65
22	SAN DIEGO (CA) HCS CA	PCT	16,068	1,635	9.83
22	SOUTHERN NV HCS (Las Vegas)	PCT	7,003	720	9.73
23	BLACK HILLS (SD) HCS: Fort Meade	SUPT	4,578	366	12.51
23	CENTRAL IA HCS: Knoxville	PCT	2,403	154	15.60
23	IOWA CITY, IA	PCT	4,094	758	5.40
23	MINNEAPOLIS, MN	PCT	9,946	1,051	9.46
23	NE-WESTERN IA HCS: Lincoln	PCT	2,264	340	6.66
23	NE-WESTERN IA HCS: Omaha	PCT	4,170	419	9.95
23	SIOUX FALLS, SD	PCT	1,185	181	6.55
ALL VA			645,895	71,538	9.03
AVERAGE			6,036	681	9.17
SD			4,787	490	3.49
CV			0.79	0.72	0.38

* Outlined cells are 1 SD below the mean.

Table 9. Occupied Psychiatry, Domiciliary, and PRRP Beds with Primary Diagnosis of PTSD, by VISN: FY 2003 *

VISN	Inpatient PTSD Treatment								Total Occupied PTSD Beds	Total Vet Population	Eligible for VA Services**	PTSD Beds Per 10,000 Elig.
	Psych. Beds	PTSD Pts.	Pct. PTSD	LOS	Dom. and PRRP Beds	PTSD Pts.	Pct. PTSD	LOS				
1	325	31	9.5%	17.4	167	16	9.6%	104.3	47	1,500,892	358,094	1.31
2	62	2	3.2%	3.5	286	12	4.2%	20.1	14	697,421	194,415	0.72
3	180	4	2.2%	5.5	320	50	15.6%	37.7	54	1,595,593	335,211	1.61
4	195	1	0.5%	4.0	376	33	8.8%	40.9	34	1,819,870	497,402	0.68
5	116	3	2.6%	8.3	430	74	17.2%	84.6	77	857,564	168,218	4.58
6	253	38	15.0%	24.2	169	1	0.6%	28.0	39	1,251,189	360,885	1.08
7	182	12	6.6%	28.6	145	39	26.9%	41.6	51	1,367,528	399,439	1.28
8	112	9	8.0%	7.8	169	30	17.8%	26.4	39	1,634,357	482,839	0.81
9	137	5	3.6%	7.0	317	5	1.6%	262.0	10	1,060,416	367,654	0.27
10	68		0.0%		330	21	6.4%	34.2	21	1,151,473	318,983	0.66
11	205	8	3.9%	16.9	100	24	24.0%	12.2	32	1,651,186	427,356	0.75
12	113	11	9.7%	39.2	532	49	9.2%	64.3	60	1,362,314	319,235	1.88
15	156	29	18.6%	34.2	234	6	2.6%	78.3	35	1,071,604	329,293	1.06
16	283	11	3.9%	21.0	263	30	11.4%	30.2	41	1,887,301	651,983	0.63
17	133	15	11.3%	32.1	628	31	4.9%	100.1	46	1,026,699	321,378	1.43
18	77	8	10.4%	7.1	134	2	1.5%	46.0	10	842,132	276,151	0.36
19	98	8	8.2%	18.1	37	6	16.2%	29.3	14	731,842	215,445	0.65
20	121	31	25.6%	14.1	626	22	3.5%	101.0	53	1,191,422	342,926	1.55
21	86	5	5.8%	17.2	152	48	31.6%	32.7	53	1,418,772	338,504	1.57
22	146	3	2.1%	124.3	199	18	9.0%	133.4	21	1,841,007	418,847	0.50
23	62	2	3.2%	17.0	352	29	8.2%	71.0	31	1,223,080	363,908	0.85
ALL VA	3,110	236	7.6%	22.7	5,966	546	9.2%	59.2	751	27,183,662	7,488,166	1.00
AVERAGE	148	12	7.3%	22.4	284	26	11.0%	65.6	37	1,294,460	356,579	1.15
SD	73	11	6.4%	26.2	164	19	8.7%	55.9	18	361,272	106,743	0.90
CV	0.49	0.95	0.87	1.17	0.58	0.72	0.79	0.85	0.48	0.28	0.30	0.78

* Bolded /underlined values are 1 SD above the mean of all VISNs, outlined values are 1 SD below the mean.

** These data were not available for 2000.

Table 9a. Occupied Psychiatry, Domiciliary, and PRRP Beds with Primary Diagnosis of PTSD, by VISN: FY 2002, FY 2003, and FY 2003-2002 change.

VISN	FY 2002								FY 2003								% Change: FY 2003- FY 2002							
	Inpatient PTSD Treatment				Domiciliary and PRRP Treatment				Inpatient PTSD Treatment				Domiciliary and PRRP Treatment				Inpatient PTSD Treatment				Domiciliary and PRRP Treatment			
	Psych Beds	PTSD Pts.	% PTSD	LOS	Dom. & PRRP Beds	PTSD Pts.	% PTSD	LOS	Psych Beds	PTSD Pts.	% PTSD	LOS	Dom. & PRRP Beds	PTSD Pts.	% PTSD	LOS	Psych Beds	PTSD Pts.	% PTSD	LOS	Dom. & PRRP Beds	PTSD Pts.	% PTSD	LOS
1	246	30	12.2%	7.8	228	18	7.9%	56.8	325	31	9.5%	17.4	167	16	9.6%	104.3	32.1%	3.3%	-21.8%	122.0%	-26.8%	-11.1%	21.4%	83.7%
2	77	1	1.3%	0.0	282	13	4.6%	15.7	62	2	3.2%	3.5	286	12	4.2%	20.1	-19.5%	100.0%	148.4%	NA	1.4%	-7.7%	-9.0%	28.0%
3	177	3	1.7%	17.3	369	46	12.5%	52.7	180	4	2.2%	5.5	320	50	15.6%	37.7	1.7%	33.3%	31.1%	-68.3%	-13.3%	8.7%	25.3%	-28.5%
4	199	6	3.0%	5.0	425	39	9.2%	32.9	195	1	0.5%	4.0	376	33	8.8%	40.9	-2.0%	-83.3%	-83.0%	-20.0%	-11.5%	-15.4%	-4.4%	24.3%
5	124	5	4.0%	11.6	423	62	14.7%	101.6	116	3	2.6%	8.3	430	74	17.2%	84.6	-6.5%	-40.0%	-35.9%	-28.2%	1.7%	19.4%	17.4%	-16.7%
6	222	40	18.0%	11.3	203	1	0.5%	123.0	253	38	15.0%	24.2	169	1	0.6%	28.0	14.0%	-5.0%	-16.6%	113.8%	-16.7%	0.0%	20.1%	-77.2%
7	172	7	4.1%	7.4	142	38	26.8%	25.8	182	12	6.6%	28.6	145	39	26.9%	41.6	5.8%	71.4%	62.0%	284.8%	2.1%	2.6%	0.5%	61.1%
8	108	6	5.6%	10.8	209	38	18.2%	44.2	112	9	8.0%	7.8	169	30	17.8%	26.4	3.7%	50.0%	44.6%	-28.2%	-19.1%	-21.1%	-2.4%	-40.2%
9	175	8	4.6%	19.6	334	7	2.1%	88.3	137	5	3.6%	7.0	317	5	1.6%	262.0	-21.7%	-37.5%	-20.2%	-64.3%	-5.1%	-28.6%	-24.7%	196.8%
10	92	4	4.3%	9.8	314	19	6.1%	46.7	68		0.0%		330	21	6.4%	34.2	-26.1%	-100.0%	-100.0%	-100.0%	5.1%	10.5%	5.2%	-26.7%
11	218	4	1.8%	12.8	115	26	22.6%	22.1	205	8	3.9%	16.9	100	24	24.0%	12.2	-6.0%	100.0%	112.7%	32.4%	-13.0%	-7.7%	6.2%	-44.8%
12	132	7	5.3%	30.9	548	45	8.2%	48.3	113	11	9.7%	39.2	532	49	9.2%	64.3	-14.4%	57.1%	83.6%	27.0%	-2.9%	8.9%	12.2%	33.1%
15	170	34	20.0%	40.5	239	6	2.5%	159.8	156	29	18.6%	34.2	234	6	2.6%	78.3	-8.2%	-14.7%	-7.1%	-15.6%	-2.1%	0.0%	2.1%	-51.0%
16	270	6	2.2%	12.3	254	37	14.6%	25.9	283	11	3.9%	21.0	263	30	11.4%	30.2	4.8%	83.3%	74.9%	70.3%	3.5%	-18.9%	-21.7%	16.6%
17	241	13	5.4%	63.2	709	48	6.8%	75.8	133	15	11.3%	32.1	628	31	4.9%	100.1	-44.8%	15.4%	109.1%	-49.2%	-11.4%	-35.4%	-27.1%	32.1%
18	75	8	10.7%	4.9	120	1	0.8%	74.0	77	8	10.4%	7.1	134	2	1.5%	46.0	2.7%	0.0%	-2.6%	46.2%	11.7%	100.0%	79.1%	-37.8%
19	112	9	8.0%	13.1	32	6	18.8%	20.7	98	8	8.2%	18.1	37	6	16.2%	29.3	-12.5%	-11.1%	1.6%	38.2%	15.6%	0.0%	-13.5%	41.9%
20	110	24	21.8%	12.5	642	29	4.5%	104.1	121	31	25.6%	14.1	626	22	3.5%	101.0	10.0%	29.2%	17.4%	13.0%	-2.5%	-24.1%	-22.2%	-2.9%
21	99	3	3.0%	10.7	149	39	26.2%	42.3	86	5	5.8%	17.2	152	48	31.6%	32.7	-13.1%	66.7%	91.9%	61.3%	2.0%	23.1%	20.6%	-22.8%
22	150	9	6.0%	33.0	242	22	9.1%	81.5	146	3	2.1%	124.3	199	18	9.0%	133.4	-2.7%	-66.7%	-65.8%	276.8%	-17.8%	-18.2%	-0.5%	63.7%
23	67	2	3.2%	4.5	366	33	9.0%	57.7	62	2	3.2%	17.0	352	29	8.2%	71.0	-7.5%	0.0%	0.0%	277.8%	-3.8%	-12.1%	-8.6%	23.1%
ALL VA	3236	229	7.1%	19.5	6345	573	9.0%	56.5	3,110	236	7.6%	22.7	5966	546	9.2%	59.2	-3.9%	3.1%	6.9%	16.6%	-6.0%	-4.7%	1.3%	4.8%
AVG	154	11	7.0%	16.1	302	27	10.7%	61.9	148	12	7.3%	22.4	284	26	11.0%	65.6	-5.2%	12.0%	20.2%	49.5%	-4.9%	-1.3%	3.6%	12.2%
SD	61	11	6.1%	14.7	174	17	8.0%	37.6	73	11	6.4%	26.2	164	19	8.7%	55.9	16.0%	57.5%	67.0%	115.0%	10.7%	27.9%	23.6%	60.2%
CV	0.40	1.02	0.88	0.91	0.58	0.64	0.74	0.61	0.49	0.95	0.87	1.17	0.58	0.72	0.79	0.85	-3.05	4.80	3.32	2.32	-2.17	-21.61	6.51	4.94

Table 10. Occupied Psychiatry, Domiciliary, and PRRP Beds with Primary Diagnosis of PTSD: FY 2003

VISN	STATION VAMC	VAMC	Inpatient PTSD Treatment				Domiciliary and PRRP Treatment			
			General Psych Beds	Diagnosis: PTSD	Percent PTSD	Length of Stay*	Dom. and PRRP beds	Diagnosis: PTSD	Percent PTSD	Length of Stay*
1	518	BEDFORD	61	0	0.00%		54	5	9.26%	116.2
1	523	BOSTON HCS	100	3	3.00%	9.3	91	11	12.09%	98.9
1	689	CONNECTICUT HCS	25	2	8.00%	5.5	8	0	0.00%	
1	631	NORTHAMPTON	108	26	24.07%	19.2	14	0	0.00%	
1	650	PROVIDENCE	11	0	0.00%					
1	402	TOGUS	8	0	0.00%					
1	405	WHITE RIVER JCT	12	0	0.00%					
2	500	ALBANY	8	0	0.00%					
2	514	BATH					1	0	0.00%	
2	532	CANANDAIGUA	27	0	0.00%					
2	670	SYRACUSE	11	1	9.09%	7.0				
2	528	WESTERN NEW YORK HCS	16	1	6.25%	0.0	285	12	4.21%	20.1
3	526	BRONX	16	1	6.25%	2.0				
3	620	HUDSON VALLEY HCS	53	2	3.77%	7.0	90	19	21.11%	44.1
3	561	NEW JERSEY HCS	47	0	0.00%		144	23	15.97%	37.3
3	630	NEW YORK HARBOR HCS	39	1	2.56%	6.0	54	4	7.41%	25.0
3	632	NORTHPORT	25	0	0.00%		32	4	12.50%	22.8
4	503	ALTOONA								
4	529	BUTLER					53	0	0.00%	
4	540	CLARKSBURG	1	0	0.00%					
4	542	COATESVILLE	65	1	1.54%	4.0	218	33	15.14%	40.9
4	562	ERIE								
4	595	LEBANON	19	0	0.00%		44	0	0.00%	
4	642	PHILADELPHIA	26	0	0.00%					
4	646	PITTSBURGH HCS	69	0	0.00%		53	0	0.00%	
4	693	WILKESBARRE	15	0	0.00%		8	0	0.00%	
4	460	WILMINGTON								
5	613	MARTINSBURG	14	1	7.14%	15.0	281	58	20.64%	101.2
5	512	MARYLAND HCS	87	2	2.30%	5.0	149	16	10.74%	24.6
5	688	WASHINGTON DC	15	0	0.00%					
6	637	ASHEVILLE	9	1	11.11%	15.0	5	1	20.00%	28.0
6	517	BECKLEY								
6	558	DURHAM	21	2	9.52%	10.5				
6	565	FAYETTEVILLE NC	17	0	0.00%					
6	590	HAMPTON	15	3	20.00%	1.0	119	0	0.00%	
6	652	RICHMOND	17	0	0.00%					
6	658	SALEM	101	14	13.86%	20.3	15	0	0.00%	
6	659	SALISBURY	73	18	24.66%	33.1	30	0	0.00%	

Table 10. Occupied Psychiatry, Domiciliary, and PRRP Beds with Primary Diagnosis of PTSD: FY 2003

VISN	STATION VAMC	VAMC	Inpatient PTSD Treatment				Domiciliary and PRRP Treatment			
			General Psych Beds	Diagnosis: PTSD	Percent PTSD	Length of Stay*	Dom. and PRRP beds	Diagnosis: PTSD	Percent PTSD	Length of Stay*
7	508	ATLANTA	19	0	0.00%		9	0	0.00%	
7	509	AUGUSTA	54	5	9.26%	55.8	59	18	30.51%	67.2
7	521	BIRMINGHAM								
7	619	CENTRAL ALABAMA VETERANS HCS	15	1	6.67%	32.0	33	1	3.03%	120.0
7	534	CHARLESTON	15	1	6.67%	3.0				
7	544	COLUMBIA SC	13	4	30.77%	6.5				
7	557	DUBLIN					44	20	45.45%	14.7
7	679	TUSCALOOSA	66	1	1.52%	3.0				
8	516	BAY PINES	13	2	15.38%	4.0	63	17	26.98%	16.9
8	546	MIAMI	11	0	0.00%		54	13	24.07%	38.8
8	573	NO. FL/SO. GA VETERANS HS	16	0	0.00%		26	0	0.00%	
8	672	SAN JUAN PR	26	1	3.85%	12.0				
8	673	TAMPA	28	4	14.29%	9.0	26	0	0.00%	
8	548	W PALM BEACH	18	2	11.11%	7.0				
9	581	HUNTINGTON								
9	596	LEXINGTON	10	0	0.00%					
9	603	LOUISVILLE	12	1	8.33%	0.0				
9	614	MEMPHIS	26	2	7.69%	10.0	7	0	0.00%	
9	626	MIDDLE TENN HCS	73	1	1.37%	5.0				
9	621	MOUNTAIN HOME	16	1	6.25%	10.0	310	5	1.61%	262.0
10	538	CHILLICOTHE	13	0	0.00%		66	3	4.55%	25.0
10	539	CINCINNATI	7	0	0.00%		72	10	13.89%	20.8
10	541	CLEVELAND	41	0	0.00%		110	0	0.00%	
10	552	DAYTON	7	0	0.00%		82	8	9.76%	54.5
11	553	ALLEN PARK	13	0	0.00%					
11	506	ANN ARBOR HCS	11	0	0.00%					
11	515	BATTLE CREEK	80	5	6.25%	8.8	84	23	27.38%	11.0
11	550	ILLIANA HCS	30	0	0.00%		4	0	0.00%	
11	583	INDIANAPOLIS					12	1	8.33%	40.0
11	610	NORTHERN INDIANA HCS	71	3	4.23%	30.3				
11	655	SAGINAW								
12	537	CHICAGO HCS	37	7	18.92%	8.0	32	1	3.13%	1.0
12	578	HINES	22	0	0.00%		20	1	5.00%	8.0
12	585	IRON MOUNTAIN					5	0	0.00%	
12	607	MADISON	11	1	9.09%	1.0	13	0	0.00%	
12	695	MILWAUKEE	6	0	0.00%		240	15	6.25%	131.9
12	556	NORTH CHICAGO	33	3	9.09%	124.7	192	21	10.94%	41.1
12	676	TOMAH	4	0	0.00%		30	11	36.67%	27.2

Table 10. Occupied Psychiatry, Domiciliary, and PRRP Beds with Primary Diagnosis of PTSD: FY 2003

VISN	STATION VAMC	VAMC	Inpatient PTSD Treatment				Domiciliary and PRRP Treatment			
			General Psych Beds	Diagnosis: PTSD	Percent PTSD	Length of Stay*	Dom. and PRRP beds	Diagnosis: PTSD	Percent PTSD	Length of Stay*
15	543	COLUMBIA MO	11	1	9.09%	4.0				
15	677	EASTERN KANSAS HCS	88	26	29.55%	37.7				
15	657	HEARTLAND-EAST HCS	38	2	5.26%	4.0	36	0	0.00%	
15	589	HEARTLAND-WEST	19	0	0.00%		198	6	3.03%	78.3
15	609	MARION IL								
15	647	POPLAR BLUFF								
15	452	WICHITA								
16	502	ALEXANDRIA	45	1	2.22%	11.0				
16	598	CENTRAL ARKANSAS HCS	40	1	2.50%	11.0	80	22	27.50%	26.1
16	564	FAYETTEVILLE AR	12	0	0.00%					
16	520	GULF COAST HCS	64	4	6.25%	44.0	148	2	1.35%	101.0
16	580	HOUSTON	44	0	0.00%					
16	586	JACKSON	16	3	18.75%	9.7	12	0	0.00%	
16	623	MUSKOGEE								
16	629	NEW ORLEANS	18	1	5.56%	3.0	6	6	100.00%	21.3
16	635	OKLAHOMA CITY	31	1	3.23%	1.0	17	0	0.00%	
16	667	SHREVEPORT	13	0	0.00%					
17	674	CENTRAL TEXAS VETERANS HCS	83	12	14.46%	36.9	378	31	8.20%	100.1
17	549	NORTH TEXAS HCS	12	0	0.00%		226	0	0.00%	
17	671	SOUTH TEXAS VETERANS HCS	38	3	7.89%	12.7	24	0	0.00%	
18	504	AMARILLO HCS								
18	501	NEW MEXICO HCS	27	3		17.3	22	1	4.55%	5.0
18	649	NORTHERN ARIZONA VA HCS					105	1	0.95%	87.0
18	644	PHOENIX	28	0	0.00%					
18	678	SOUTHERN ARIZONA	22	5	22.73%	1.0	7	0	0.00%	
18	519	WEST TEXAS HCS								
19	442	CHEYENNE								
19	554	DENVER	32	2	6.25%	27.5				
19	575	GRAND JUNCTION	4	0	0.00%					
19	436	MONTANA HCS								
19	660	SALT LAKE CITY HCS	16	0	0.00%		13	0	0.00%	
19	666	SHERIDAN	46	6	13.04%	15.0	24	6	25.00%	29.3
20	463	ALASKA HCS & RO								
20	531	BOISE	11	5	45.45%	22.0	5	0	0.00%	
20	648	PORTLAND	27	0	0.00%					
20	663	PUGET SOUND HCS	51	16	31.37%	11.9	75	14	18.67%	49.6
20	653	ROSEBURG HCS	26	10	38.46%	13.8	19	0	0.00%	
20	668	SPOKANE	6	0	0.00%					
20	687	WALLA WALLA					25	0	0.00%	
20	692	WHITE CITY					502	8	1.59%	191.0

Table 10. Occupied Psychiatry, Domiciliary, and PRRP Beds with Primary Diagnosis of PTSD: FY 2003

			Inpatient PTSD Treatment				Domiciliary and PRRP Treatment			
VISN	STATION VAMC	VAMC	General Psych Beds	Diagnosis: PTSD	Percent PTSD	Length of Stay*	Dom. and PRRP beds	Diagnosis: PTSD	Percent PTSD	Length of Stay*
21	570	CENTRAL CALIFORNIA HCS	9	0	0.00%	33.0	152	48	31.58%	32.7
21	459	HONOLULU	12	1	8.33%					
21	612	NORTHERN CALIFORNIA HCS								
21	640	PALO ALTO HCS	49	4	8.16%					
21	662	SAN FRANCISCO	7	0	0.00%					
21	654	SIERRA NEVADA HCS	9	0	0.00%					
22	691	GREATER LOS ANGELES HCS	92	2	2.17%	182.5	199	18	9.05%	133.4
22	605	LOMA LINDA	9	0	0.00%	8.0				
22	600	LONG BEACH HCS	10	1	10.00%					
22	664	SAN DIEGO HCS	29	0	0.00%					
22	593	SOUTHERN NEVADA HCS	6	0	0.00%					
23	568	BLACK HILLS HCS	7	2	28.57%	17.0	162	12	7.41%	146.1
23	555	CENTRAL IOWA HCS	8	0	0.00%					
23	437	FARGO	5	0	0.00%					
23	584	IOWA CITY	8	0	0.00%					
23	618	MINNEAPOLIS	13	0	0.00%					
23	636	NEBRASKA- WESTERN IOWA HCS	10	0	0.00%		70	7	10.00%	31.0
23	438	SIOUX FALLS	2	0	0.00%					
23	656	ST CLOUD	9	0	0.00%					
ALL VA			3110	236	7.59%	22.7	5966	546	9.15%	59.2
AVERAGE			28	2	5.90%	18.0	85	8	9.48%	59.0
SD			25	5	9.07%	29.0	98	11	15.19%	54.9
CV			0.89	2.11	1.54	1.61	1.15	1.46	1.60	0.93

* Outlined values are 1 SD above the mean of all VAMCs and reflect long length of stay.

Table 11. Comparison of all inpatient general psychiatry treatment and treatment for PTSD, by VISN, FY 2003.

VISN	All General Psychiatry Inpatient Care				Percent Tx. for PTSD		Inpatient Tx. of PTSD				PTSD/Gen. Psych Ratio of Bed Days per ...*†	
	Episodes of Care	Bed Days/ Episode	Unique Veterans	Bed Days/ Vet/Year	All Episodes	Unique Veterans*	Episodes of Care	Bed Days/ Episode	Unique Veterans	Bed Days/ Vet/Year	Episode	Vet/Year
1	4,594	15.75	3,109	23.3	15.8%	17.9%	724	15.3	555	<u>19.9</u>	1.0	0.9
2	1,958	11.99	1,350	17.4	5.9%	7.2%	116	9.5	97	11.4	0.8	0.7
3	3,546	17.27	2,467	24.8	5.6%	7.1%	198	11.8	176	13.3	0.7	0.5
4	3,508	15.45	2,498	21.7	5.9%	7.3%	207	10.7	183	12.1	0.7	0.6
5	3,940	11.49	2,389	19.0	4.0%	5.7%	158	7.3	136	8.4	0.6	0.4
6	6,396	11.99	4,291	17.9	15.6%	17.3%	997	14.2	743	19.0	1.2	<u>1.1</u>
7	5,042	13.38	3,489	19.3	11.9%	13.6%	599	8.1	475	10.3	0.6	0.5
8	5,969	7.24	4,103	10.5	4.9%	5.7%	290	5.8	233	7.2	0.8	0.7
9	5,067	10.05	3,598	14.2	5.6%	6.3%	286	8.7	228	10.9	0.9	0.8
10	3,467	9.87	2,441	14.0	3.4%	4.3%	119	8.0	106	9.0	0.8	0.6
11	3,687	18.13	2,616	25.6	3.9%	4.7%	145	11.8	122	14.0	0.7	0.5
12	4,077	11.63	2,667	17.8	5.8%	6.9%	235	9.7	183	12.5	0.8	0.7
15	4,680	13.64	3,288	19.4	7.7%	9.1%	360	<u>30.2</u>	298	<u>36.5</u>	<u>2.2</u>	<u>1.9</u>
16	7,502	13.77	5,499	18.8	4.6%	5.3%	347	11.9	293	14.1	0.9	0.8
17	4,403	18.27	3,087	26.1	6.9%	7.4%	302	13.2	229	17.4	0.7	0.7
18	2,893	8.58	1,951	12.7	9.0%	11.7%	261	10.6	229	12.1	<u>1.2</u>	1.0
19	2,339	16.31	1,715	22.2	13.5%	16.7%	315	8.7	287	9.5	0.5	0.4
20	3,722	10.73	2,701	14.8	20.5%	23.7%	762	13.5	640	16.0	<u>1.3</u>	<u>1.1</u>
21	3,035	12.82	2,003	19.4	4.3%	5.6%	129	8.4	113	9.6	0.7	0.5
22	3,726	15.24	2,714	20.9	3.9%	4.7%	144	9.0	127	10.2	0.6	0.5
23	3,451	7.46	2,341	11.0	3.7%	4.7%	129	5.0	110	5.8	0.7	0.5
ALL VA	87,002	12.82	58,705	19.0	7.8%	9.4%	6,823	12.3	5,492	15.2	1.0	0.8
AVERAGE	4,143	12.91	2,872	18.6	7.7%	9.2%	325	11.0	265	13.3	0.9	0.7
SD	1,324	3.3	950	4.5	4.8%	5.5%	243	5.2	185	6.5	0.4	0.3
CV	0.32	0.25	0.33	0.24	0.63	0.60	0.75	0.47	0.70	0.49	0.43	0.45

*Bolded (underlined) values are 1 SD above the mean of all VISNs; outlined values are 1 SD below the mean.

† Ratio of bed days of care for PTSD treatment compared to bed days of care for all general psychiatry inpatient treatment.

Table 11-2. Comparison of all Domiciliary and PRRP treatment and treatment for PTSD, by VISN, FY 2003.

VISN	All Domiciliary and PRRP Care				Percent Tx. for PTSD		Domiciliary and PRRP Tx. of PTSD				PTSD/Dom. and PRRP		Veterans Treated for PTSD/			
	Episodes of Care	Bed Days/ Episode	Unique Veterans	Bed Days/ Vet/Year	All Episodes	Unique Veterans*	Episodes of Care	Bed Days/ Episode*	Unique Veterans	Bed Days/ Vet/Year*	Ratio of Bed Days per ...*†	Vet/Year	VA Eligible (SC/Low Inc)	Episodes of care (gen. Psyc. inpt)	Total PTSD Episodes of Care††	Total PTSD Episodes/ VA Eligible
1	885	66.0	753	77.6	5.3%	6.0%	47	82.7	45	86.4	<u>1.3</u>	<u>1.1</u>	358,094	724	724	2.02
2	1,518	72.0	1,232	88.7	19.6%	18.3%	298	13.4	225	17.8	0.2	0.2	194,415	116	116	0.60
3	2,094	59.2	1,742	71.1	15.8%	18.2%	330	58.5	317	60.9	1.0	0.9	335,211	198	198	0.59
4	2,604	52.4	2,423	56.3	7.3%	7.6%	189	60.4	184	62.0	1.2	<u>1.1</u>	497,402	207	207	0.42
5	1,717	74.0	1,517	83.7	15.5%	16.7%	266	90.3	254	94.6	1.2	<u>1.1</u>	168,218	158	158	0.94
6	1,612	48.1	1,476	52.5	0.3%	0.3%	5	10.0	5	10.0	0.2	0.2	360,885	997	997	2.76
7	740	58.8	699	62.3	32.2%	32.0%	238	42.3	224	45.0	0.7	0.7	399,439	599	599	1.50
8	1,009	73.5	914	81.2	19.9%	21.2%	201	62.4	194	64.7	0.8	0.8	482,839	290	290	0.60
9	850	87.3	820	90.5	1.5%	1.6%	13	93.4	13	93.4	1.1	1.0	367,654	286	286	0.78
10	2,953	36.9	2,481	44.0	5.1%	5.9%	152	52.5	147	54.3	<u>1.4</u>	<u>1.2</u>	318,983	119	119	0.37
11	928	40.8	781	48.5	40.9%	39.4%	380	22.7	308	28.0	0.6	0.6	427,356	145	145	0.34
12	2,379	57.8	2,083	66.1	15.8%	15.9%	375	42.2	331	47.8	0.7	0.7	319,235	235	235	0.74
15	465	145.1	449	150.3	1.9%	1.6%	9	<u>174.6</u>	7	<u>224.4</u>	1.2	<u>1.5</u>	329,293	360	360	1.09
16	1,444	62.0	1,365	65.6	21.3%	22.1%	308	37.6	302	38.4	0.6	0.6	651,983	347	347	0.53
17	2,503	67.4	1,954	86.3	5.9%	7.1%	147	86.1	139	91.1	<u>1.3</u>	<u>1.1</u>	321,378	302	302	0.94
18	633	74.6	604	78.2	0.6%	0.7%	4	31.3	4	31.3	0.4	0.4	276,151	261	261	0.95
19	356	35.6	336	37.7	15.7%	16.1%	56	37.4	54	38.8	1.1	1.0	215,445	315	315	1.46
20	1,875	92.8	1,736	100.2	8.5%	8.9%	160	64.0	155	66.0	0.7	0.7	342,926	762	762	2.22
21	709	78.0	661	83.6	37.0%	38.6%	262	56.5	255	58.1	0.7	0.7	338,504	129	129	0.38
22	741	122.2	718	126.1	12.6%	12.8%	93	<u>143.1</u>	92	<u>144.6</u>	1.2	<u>1.1</u>	418,847	144	144	0.34
23	2,201	53.7	1,925	61.4	10.6%	10.8%	233	60.5	208	67.8	1.1	<u>1.1</u>	363,908	129	129	0.35
ALL VA	30,216	64.0	26,158	73.9	12.5%	13.0%	3,766	53.0	3,399	58.7	0.8	0.8	7,124,258	6,823	6,823	0.96
AVERAGE	1,439	69.4	1,270	76.8	14.0%	14.4%	179	63.0	165	67.9	0.9	0.8	356,579	325	325	0.95
SD	786	26.4	660.9	26.5	11.6%	11.6%	125.2	39.8	111.5	47.1	0.4	0.3	106,743.4	242.9	242.9	0.68
CV	0.55	0.38	0.52	0.35	0.83	0.80	0.70	0.63	0.68	0.69	0.40	0.40	0.30	0.75	0.75	0.72

*Bolded (underlined) values are 1 SD above the mean of all VISNs. Outlined values are 1 SD below the mean.

† Ratio of bed days of care for PTSD treatment compared to bed days of care for all domiciliary and PRRP treatment.

†† Includes general psychiatry inpatient episodes (from table 11) and domiciliary and PRRP episodes for veterans with PTSD.

Table 11a. Patients treated for PTSD in general psychiatry inpatient beds and domiciliary and PRRP beds by VISN: FY 2002, FY 2003 and FY 2003-2002 change.

	General Psychiatry Inpatient Care												Domiciliary and PRRP Care											
	FY 2002				FY 2003				Change				FY 2002				FY 2003				Change			
	Episodes of Care	Unique Veterans	Bed Days/ Episode	Bed Days/ Vet/Year	Episodes of Care	Unique Veterans	Bed Days/ Episode	Bed Days/ Vet/Year	Episodes of Care	Unique Veterans	Bed Days/ Episode	Bed Days/ Vet/Year	Episodes of Care	Unique Veterans	Bed Days/ Episode	Bed Days/ Vet/Year	Episodes of Care	Unique Veterans	Bed Days/ Episode	Bed Days/ Vet/Year	Episodes of Care	Unique Veterans	Bed Days/ Episode	Bed Days/ Vet/Year
1	737	551	15.6	20.9	724	555	15.3	19.9	-1.8%	0.7%	-2.4%	-4.8%	35	34	71.1	73.2	47	45	82.7	86.4	34.3%	32.4%	16.3%	18.0%
2	110	89	8.8	10.8	116	97	9.5	11.4	5.5%	9.0%	8.8%	5.3%	276	218	14.4	18.3	298	225	13.4	17.8	8.0%	3.2%	-7.0%	-2.7%
3	212	180	12.0	14.2	198	176	11.8	13.3	-6.6%	-2.2%	-1.9%	-6.3%	349	336	63.5	65.9	330	317	58.5	60.9	-5.4%	-5.7%	-7.8%	-7.6%
4	245	213	10.2	11.8	207	183	10.7	12.1	-15.5%	-14.1%	4.2%	2.5%	251	247	58.7	59.6	189	184	60.4	62.0	-24.7%	-25.5%	3.0%	4.1%
5	179	158	9.1	10.3	158	136	7.3	8.4	-11.7%	-13.9%	-20.1%	-18.1%	168	164	108.4	111.0	266	254	90.3	94.6	58.3%	54.9%	-16.7%	-14.8%
6	1,037	727	14.1	20.1	997	743	14.2	19.0	-3.9%	2.2%	0.7%	-5.3%	8	8	18.3	18.3	5	5	10.0	10.0	-37.5%	-37.5%	-45.2%	-45.2%
7	623	493	9.4	11.9	599	475	8.1	10.3	-3.9%	-3.7%	-13.4%	-13.6%	260	219	30.2	35.8	238	224	42.3	45.0	-8.5%	2.3%	40.4%	25.7%
8	280	224	6.1	7.7	290	233	5.8	7.2	3.6%	4.0%	-5.6%	-6.0%	197	189	58.6	61.1	201	194	62.4	64.7	2.0%	2.6%	6.5%	5.8%
9	341	277	9.0	11.1	286	228	8.7	10.9	-16.1%	-17.7%	-3.9%	-2.0%	7	7	67.3	67.3	13	13	93.4	93.4	85.7%	85.7%	38.8%	38.8%
10	173	138	9.9	12.4	119	106	8.0	9.0	-31.2%	-23.2%	-18.7%	-27.2%	175	171	52.0	53.2	152	147	52.5	54.3	-13.1%	-14.0%	1.0%	2.1%
11	160	131	10.8	13.2	145	122	11.8	14.0	-9.4%	-6.9%	9.1%	6.1%	376	289	25.5	33.1	380	308	22.7	28.0	1.1%	6.6%	-10.9%	-15.5%
12	233	184	11.3	14.3	235	183	9.7	12.5	0.9%	-0.5%	-13.8%	-12.6%	350	316	48.1	53.2	375	331	42.2	47.8	7.1%	4.7%	-12.2%	-10.2%
15	430	354	27.6	33.5	360	298	30.2	36.5	-16.3%	-15.8%	9.7%	9.1%	12	12	114.3	114.3	9	7	174.6	224.4	-25.0%	-41.7%	52.8%	96.4%
16	266	236	9.9	11.1	347	293	11.9	14.1	30.5%	24.2%	20.6%	26.8%	379	372	34.2	34.8	308	302	37.6	38.4	-18.7%	-18.8%	10.1%	10.2%
17	382	299	11.1	14.2	302	229	13.2	17.4	-20.9%	-23.4%	19.0%	22.9%	123	113	85.3	92.9	147	139	86.1	91.1	19.5%	23.0%	0.9%	-1.9%
18	250	220	10.3	11.7	261	229	10.6	12.1	4.4%	4.1%	3.4%	3.7%	2	2	76.0	76.0	4	4	31.3	31.3	100.0%	100.0%	-58.9%	-58.9%
19	352	297	9.1	10.7	315	287	8.7	9.5	-10.5%	-3.4%	-4.5%	-11.6%	55	53	36.1	37.5	56	54	37.4	38.8	1.8%	1.9%	3.7%	3.6%
20	728	621	13.9	16.4	762	640	13.5	16.0	4.7%	3.1%	-3.4%	-1.9%	211	199	77.6	82.3	160	155	64.0	66.0	-24.2%	-22.1%	-17.6%	-19.8%
21	161	141	9.3	10.6	129	113	8.4	9.6	-19.9%	-19.9%	-9.3%	-9.3%	261	252	57.1	59.1	262	255	56.5	58.1	0.4%	1.2%	-1.0%	-1.7%
22	182	157	11.4	13.2	144	127	9.0	10.2	-20.9%	-19.1%	-20.8%	-22.6%	69	68	143.5	145.6	93	92	143.1	144.6	34.8%	35.3%	-0.3%	-0.7%
23	94	79	5.2	6.2	129	110	5.0	5.8	37.2%	39.2%	-3.7%	-5.1%	172	159	56.6	61.3	233	208	60.5	67.8	35.5%	30.8%	6.9%	10.6%
All VA	7,175	5,700	12.4	15.6	6,823	5,492	12.3	15.2	-4.9%	-3.6%	-1.2%	-2.5%	3,736	3,376	52.2	57.7	3,766	3,399	53.0	58.7	0.8%	0.7%	1.5%	1.6%
AVG.	342	275	11.1	13.6	325	265	11.0	13.3	-4.9%	-3.7%	-2.2%	-3.3%	178	163	61.7	64.5	179	165	63.0	67.9	11.0%	10.4%	0.1%	1.7%
S.D.	244	179	4.5	5.7	243	185	5.2	6.5	16.3%	15.6%	11.7%	13.2%	130	117	32.4	32.1	125	112	39.8	47.1	36.2%	36.6%	25.4%	30.5%
C.V.	0.72	0.65	0.40	0.42	0.75	0.70	0.47	0.49	-3.36	-4.23	-5.31	-3.95	0.73	0.72	0.52	0.50	0.70	0.68	0.63	0.69	3.29	3.50	188.38	17.60

Table 11b. Percent treated for PTSD in inpatient general psychiatry beds and domiciliary and PRRP beds by VISN: FY 2002, FY 2003 and FY 2003-2002 change.

VISN	Inpatient General Psychiatry						Domiciliary and PRRP					
	FY 2002		FY 2003		% Change: FY 2003-2002		FY 2002		FY 2003		% Change: FY 2003-2002	
	Percent Tx. for PTSD		Percent Tx. for PTSD		Percent Tx. for PTSD		Percent Tx. for PTSD		Percent Tx. for PTSD		Percent Tx. for PTSD	
	All Episodes	Unique Veterans	All Episodes	Unique Veterans	All Episodes	Unique Veterans	All Episodes	Unique Veterans*	All Episodes	Unique Veterans*	All Episodes	Unique Veterans
1	14.6%	16.4%	15.8%	17.9%	8.0%	8.6%	5.8%	6.2%	5.3%	6.0%	-9.1%	-3.3%
2	5.0%	6.0%	5.9%	7.2%	18.5%	19.9%	18.7%	18.1%	19.6%	18.3%	4.8%	0.7%
3	5.8%	7.1%	5.6%	7.1%	-3.4%	-0.2%	16.1%	18.7%	15.8%	18.2%	-2.4%	-2.9%
4	6.5%	7.9%	5.9%	7.3%	-8.8%	-6.7%	8.5%	9.1%	7.3%	7.6%	-14.9%	-16.9%
5	4.7%	6.4%	4.0%	5.7%	-14.8%	-10.5%	11.8%	12.9%	15.5%	16.7%	31.7%	29.7%
6	14.8%	16.1%	15.6%	17.3%	5.1%	7.6%	0.5%	0.5%	0.3%	0.3%	-35.7%	-34.5%
7	13.1%	14.5%	11.9%	13.6%	-9.1%	-5.9%	32.2%	30.0%	32.2%	32.0%	-0.2%	7.0%
8	4.7%	5.5%	4.9%	5.7%	3.5%	3.2%	18.8%	19.6%	19.9%	21.2%	6.1%	8.4%
9	6.7%	7.7%	5.6%	6.3%	-15.5%	-17.4%	0.8%	0.9%	1.5%	1.6%	85.1%	85.9%
10	4.8%	5.5%	3.4%	4.3%	-28.3%	-20.7%	5.8%	6.7%	5.1%	5.9%	-11.8%	-11.7%
11	4.1%	4.7%	3.9%	4.7%	-4.7%	-1.1%	37.5%	34.0%	40.9%	39.4%	9.2%	16.0%
12	5.8%	7.1%	5.8%	6.9%	-1.1%	-3.5%	13.9%	14.2%	15.8%	15.9%	13.3%	11.8%
15	8.5%	10.3%	7.7%	9.1%	-9.7%	-11.6%	2.2%	2.3%	1.9%	1.6%	-10.6%	-32.7%
16	3.6%	4.5%	4.6%	5.3%	29.9%	19.4%	25.9%	27.2%	21.3%	22.1%	-17.6%	-18.6%
17	8.5%	9.9%	6.9%	7.4%	-19.4%	-24.7%	6.3%	7.6%	5.9%	7.1%	-6.6%	-6.9%
18	9.0%	11.2%	9.0%	11.7%	0.6%	4.5%	0.3%	0.3%	0.6%	0.7%	100.0%	95.7%
19	13.6%	16.4%	13.5%	16.7%	-1.2%	1.8%	20.9%	21.6%	15.7%	16.1%	-24.8%	-25.7%
20	20.2%	23.5%	20.5%	23.7%	1.2%	0.7%	10.5%	10.8%	8.5%	8.9%	-18.4%	-17.5%
21	5.0%	7.0%	4.3%	5.6%	-15.7%	-19.2%	36.8%	38.0%	37.0%	38.6%	0.4%	1.5%
22	4.5%	5.4%	3.9%	4.7%	-14.6%	-13.9%	10.4%	10.6%	12.6%	12.8%	20.2%	20.6%
23	2.7%	3.3%	3.7%	4.7%	38.0%	41.2%	7.7%	8.0%	10.6%	10.8%	37.7%	35.1%
ALL VA	8.0%	9.5%	7.8%	9.4%	-2.2%	-2.0%	12.5%	13.0%	12.5%	13.0%	0.0%	0.2%
AVERAGE	7.9%	9.3%	7.7%	9.2%	-2.0%	-1.4%	13.9%	14.2%	14.0%	14.4%	7.4%	6.7%
SD	4.7%	5.2%	4.8%	5.5%	16.0%	15.6%	11.4%	11.1%	11.6%	11.6%	33.4%	33.7%
CV	0.59	0.56	0.63	0.60	-8.08	-11.46	0.82	0.78	0.83	0.80	4.49	5.00

Table 12. Comparison of Inpatient General Psychiatry Treatment and Treatment for PTSD, by VAMC, FY 2003. *

VISN	VAMC	<u>All General Psychiatry Inpatient Care</u>				<u>Percent Tx. for PTSD</u>		<u>Inpatient Treatment of PTSD</u>				<u>PTSD/General Psych Ratio</u>	
		<u>Episodes</u>	<u>Bed Days/</u>	<u>Unique</u>	<u>Bed Days/</u>	<u>All</u>	<u>Unique</u>	<u>Episodes</u>	<u>Bed Days/</u>	<u>Unique</u>	<u>Bed Days/</u>	<u>of Bed Days per ...**</u>	
		<u>of Care</u>	<u>Episode</u>	<u>Veterans</u>	<u>Vet/Year</u>	<u>Episodes</u>	<u>Veterans</u>	<u>of Care</u>	<u>Episode</u>	<u>Veterans</u>	<u>Vet/Year</u>	<u>Episode</u>	<u>Vet/Year</u>
1	BEDFORD	976	12.8	746	16.7	1.7%	1.7%	17	8.4	13	11.0	0.7	0.7
1	BOSTON HCS	1,296	16.0	862	24.0	7.6%	9.4%	98	10.7	81	12.9	0.7	0.5
1	CONNECTICUT HCS	537	15.2	380	21.5	7.4%	8.2%	40	11.4	31	14.6	0.7	0.7
1	NORTHAMPTON	840	27.0	669	33.8	52.4%	52.5%	440	18.9	351	23.6	0.7	0.7
1	PROVIDENCE	541	9.6	380	13.7	8.1%	8.4%	44	10.8	32	14.8	1.1	1.1
1	TOGUS	46	5.2	41	5.8	2.2%	2.4%	1	7.0	1	7.0	1.3	1.2
1	WHITE RIVER JCT	358	8.2	254	11.6	23.5%	22.0%	84	7.5	56	11.3	0.9	1.0
2	ALBANY	387	7.5	302	9.7	4.9%	5.6%	19	6.7	17	7.5	0.9	0.8
2	CANANDAIGUA	316	28.0	245	36.2	3.8%	4.5%	12	12.0	11	13.1	0.4	0.4
2	SYRACUSE	394	10.5	288	14.4	9.1%	10.8%	36	9.8	31	11.4	0.9	0.8
2	WESTERN NEW YORK HCS	861	8.8	581	13.0	5.7%	7.1%	49	9.8	41	11.7	1.1	0.9
3	BRONX	519	16.1	399	21.0	9.6%	11.0%	50	15.2	44	17.3	0.9	0.8
3	HUDSON VALLEY HCS	428	25.4	341	31.9	11.7%	13.8%	50	9.4	47	10.0	0.4	0.3
3	NEW JERSEY HCS	1,007	17.1	685	25.2	5.3%	6.9%	53	11.6	47	13.1	0.7	0.5
3	NEW YORK HARBOR HCS	1,259	10.8	948	14.4	3.2%	3.9%	40	11.4	37	12.3	1.1	0.9
3	NORTHPORT	333	33.3	260	42.7	1.5%	1.9%	5	6.2	5	6.2	0.2	0.1
4	CLARKSBURG	187	8.2	143	10.8	9.1%	11.2%	17	6.2	16	6.6	0.8	0.6
4	COATESVILLE	515	22.9	406	29.1	9.7%	11.1%	50	16.3	45	18.1	0.7	0.6
4	LEBANON	480	11.8	340	16.6	5.0%	6.2%	24	10.8	21	12.3	0.9	0.7
4	PHILADELPHIA	874	12.9	652	17.2	4.3%	5.5%	38	12.8	36	13.5	1.0	0.8
4	PITTSBURGH HCS	1,128	18.1	843	24.2	5.6%	6.9%	63	6.5	58	7.1	0.4	0.3
4	WILKESBARRE	324	11.1	241	14.9	4.6%	5.4%	15	8.6	13	9.9	0.8	0.7
5	MARTINSBURG	667	7.3	445	11.0	9.7%	13.5%	65	6.4	60	6.9	0.9	0.6
5	MARYLAND HCS	2,231	15.1	1,473	22.8	2.3%	3.3%	52	9.0	49	9.5	0.6	0.4
5	WASHINGTON DC	1,042	6.5	715	9.4	3.9%	5.3%	41	6.5	38	7.1	1.0	0.8
6	ASHEVILLE	348	9.6	271	12.3	29.9%	29.5%	104	9.1	80	11.8	0.9	1.0
6	DURHAM	928	8.2	701	10.8	12.0%	13.7%	111	6.8	96	7.9	0.8	0.7
6	FAYETTEVILLE NC	723	7.7	496	11.2	8.9%	10.1%	64	6.3	50	8.1	0.8	0.7
6	HAMPTON	1,766	7.3	1,044	12.3	13.0%	13.4%	229	8.0	140	13.2	1.1	1.1
6	RICHMOND	586	7.1	463	9.0	2.4%	2.6%	14	8.1	12	9.5	1.1	1.1
6	SALEM	999	19.3	712	27.1	28.1%	27.2%	281	13.6	194	19.6	0.7	0.7
6	SALISBURY	1,046	22.8	870	27.4	18.5%	21.5%	194	32.2	187	33.4	1.4	1.2

Table 12. Comparison of Inpatient General Psychiatry Treatment and Treatment for PTSD, by VAMC, FY 2003. *

VISN	VAMC	All General Psychiatry Inpatient Care				Percent Tx. for PTSD		Inpatient Treatment of PTSD				PTSD/General Psych Ratio	
		Episodes of Care	Bed Days/ Episode	Unique Veterans	Bed Days/ Vet/Year	All Episodes	Unique Veterans	Episodes of Care	Bed Days/ Episode	Unique Veterans	Bed Days/ Vet/Year	of Bed Days per ...**	
												Episode	Vet/Year
7	ATLANTA	912	9.2	698	12.1	10.7%	12.5%	98	8.4	87	9.4	0.9	0.8
7	AUGUSTA	1,418	12.2	989	17.5	12.8%	15.1%	182	7.5	149	9.2	0.6	0.5
7	CENTRAL ALABAMA VETERANS HCS	1,002	10.5	668	15.8	15.3%	16.0%	153	8.8	107	12.5	0.8	0.8
7	CHARLESTON	608	8.6	457	11.4	8.1%	9.0%	49	5.7	41	6.8	0.7	0.6
7	COLUMBIA SC	512	8.2	393	10.7	14.8%	17.0%	76	7.6	67	8.7	0.9	0.8
7	TUSCALOOSA	590	36.9	474	46.0	6.9%	8.2%	41	11.7	39	12.3	0.3	0.3
8	BAY PINES	1,019	7.8	741	10.7	4.3%	5.4%	44	5.9	40	6.5	0.8	0.6
8	MIAMI	739	7.2	557	9.5	1.6%	2.2%	12	6.7	12	6.7	0.9	0.7
8	NO. FL/SO. GA VETERANS HS	1,026	5.9	791	7.6	5.8%	6.6%	60	4.0	52	4.6	0.7	0.6
8	SAN JUAN PR	823	10.0	628	13.1	3.8%	3.8%	31	9.1	24	11.8	0.9	0.9
8	TAMPA	1,188	8.0	852	11.2	4.4%	4.8%	52	7.6	41	9.7	1.0	0.9
8	W PALM BEACH	1,174	5.3	679	9.1	7.8%	9.4%	91	4.6	64	6.6	0.9	0.7
9	LEXINGTON	576	7.8	479	9.4	3.0%	3.5%	17	5.6	17	5.6	0.7	0.6
9	LOUISVILLE	826	6.8	561	10.0	1.7%	2.3%	14	4.3	13	4.6	0.6	0.5
9	MEMPHIS	638	9.1	499	11.6	9.2%	10.6%	59	9.8	53	10.9	1.1	0.9
9	MIDDLE TENN HCS	2,076	13.8	1,436	19.9	4.7%	5.3%	98	10.6	76	13.6	0.8	0.7
9	MOUNTAIN HOME	951	6.8	673	9.6	10.3%	10.3%	98	7.3	69	10.3	1.1	1.1
10	CHILLICOTHE	934	7.3	682	9.9	3.9%	5.0%	36	4.8	34	5.1	0.7	0.5
10	CINCINNATI	594	9.8	444	13.1	6.1%	6.3%	36	9.0	28	11.6	0.9	0.9
10	CLEVELAND	1,173	13.8	842	19.2	1.9%	2.6%	22	11.8	22	11.8	0.9	0.6
10	DAYTON	766	7.1	575	9.5	3.3%	4.0%	25	7.9	23	8.6	1.1	0.9
11	ALLEN PARK	687	8.2	527	10.6	1.9%	1.9%	13	4.5	10	5.9	0.6	0.6
11	ANN ARBOR HCS	527	10.3	404	13.5	3.8%	4.2%	20	10.7	17	12.5	1.0	0.9
11	BATTLE CREEK	1,321	21.3	927	30.3	4.8%	6.1%	63	11.0	57	12.1	0.5	0.4
11	ILLIANA HCS	468	19.8	346	26.8	1.7%	2.3%	8	9.8	8	9.8	0.5	0.4
11	INDIANAPOLIS	379	5.8	312	7.1	4.0%	4.5%	15	3.9	14	4.1	0.7	0.6
11	NORTHERN INDIANA HCS	305	53.2	241	67.3	8.5%	7.9%	26	23.5	19	32.2	0.4	0.5
12	CHICAGO HCS	1,333	9.8	876	14.9	7.1%	8.9%	95	10.3	78	12.5	1.0	0.8
12	HINES	931	8.4	692	11.3	4.1%	4.3%	38	7.9	30	10.0	0.9	0.9
12	MADISON	414	11	288	15.9	7.5%	6.3%	31	5.7	18	9.8	0.5	0.6
12	MILWAUKEE	673	5.4	479	7.6	4.5%	5.8%	30	4.7	28	5.0	0.9	0.7
12	NORTH CHICAGO	471	34.9	367	44.8	6.2%	6.8%	29	21.9	25	25.4	0.6	0.6
12	TOMAH	255	7.5	209	9.1	4.7%	5.7%	12	4.3	12	4.3	0.6	0.5
15	COLUMBIA MO	410	8.5	329	10.6	9.0%	9.7%	37	9.1	32	10.6	1.1	1.0
15	EASTERN KANSAS HCS	1,624	22.1	1,098	32.6	14.9%	18.2%	242	40.5	200	49.0	1.8	1.5
15	HEARTLAND-EAST HCS	1,955	8.5	1,412	11.7	3.5%	4.1%	69	9.8	58	11.6	1.1	1.0
15	HEARTLAND-WEST	691	11.6	548	14.6	1.7%	1.8%	12	5.8	10	6.9	0.5	0.5

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VISN	VAMC	All General Psychiatry Inpatient Care				Percent Tx. for PTSD		Inpatient Treatment of PTSD				PTSD/General Psych Ratio	
		Episodes of Care	Bed Days/ Episode	Unique Veterans	Bed Days/ Vet/Year	All Episodes	Unique Veterans	Episodes of Care	Bed Days/ Episode	Unique Veterans	Bed Days/ Vet/Year	of Bed Days per ...**	
												Episode	Vet/Year
16	ALEXANDRIA	647	23.7	448	34.2	1.2%	1.6%	8	27.4	7	31.3	1.2	0.9
16	CENTRAL ARKANSAS HCS	1,120	17	773	24.7	9.2%	10.0%	103	17.2	77	23.0	1.0	0.9
16	FAYETTEVILLE AR	509	7.7	403	9.8	7.7%	7.9%	39	9.2	32	11.2	1.2	1.1
16	GULF COAST HCS	1,231	20	983	25.0	2.6%	3.3%	32	14.6	32	14.6	0.7	0.6
16	HOUSTON	1,111	11.1	842	14.6	5.9%	6.3%	65	9.4	53	11.5	0.8	0.8
16	JACKSON	595	12	468	15.2	2.2%	2.8%	13	11.6	13	11.6	1.0	0.8
16	NEW ORLEANS	741	8.6	554	11.4	5.0%	6.0%	37	4.2	33	4.8	0.5	0.4
16	OKLAHOMA CITY	845	12	661	15.4	4.7%	5.9%	40	8.8	39	9.0	0.7	0.6
16	SHREVEPORT	703	6.3	526	8.4	1.4%	1.9%	10	5.6	10	5.6	0.9	0.7
17	CENTRAL TEXAS VETERANS HCS	1,140	46.4	848	62.4	11.1%	10.7%	126	19.8	91	27.4	0.4	0.4
17	NORTH TEXAS HCS	1,322	8.5	1,060	10.6	1.5%	1.8%	20	8.0	19	8.4	0.9	0.8
17	SOUTH TEXAS VETERANS HCS	1,941	8.4	1,262	12.9	8.0%	9.4%	156	8.5	119	11.2	1.0	0.9
18	NEW MEXICO HCS	637	11.2	448	15.9	7.4%	8.9%	47	7.4	40	8.7	0.7	0.5
18	PHOENIX	1,715	6.9	1,094	10.8	5.4%	7.3%	93	7.4	80	8.7	1.1	0.8
18	SOUTHERN ARIZONA	541	10.8	442	13.3	22.4%	25.1%	121	14.3	111	15.6	1.3	1.2
19	DENVER	815	16.6	646	21.0	24.4%	28.8%	199	6.4	186	6.8	0.4	0.3
19	GRAND JUNCTION	256	7.5	180	10.6	7.0%	8.9%	18	5.4	16	6.1	0.7	0.6
19	MONTANA HCS	49	6.7	45	7.3	2.0%	2.2%	1	8.0	1	8.0	1.2	1.1
19	SALT LAKE CITY HCS	747	9.1	540	12.6	6.7%	8.1%	50	7.4	44	8.4	0.8	0.7
19	SHERIDAN	472	32.9	376	41.3	10.0%	11.4%	47	20.9	43	22.8	0.6	0.6
20	BOISE	392	7.5	275	10.7	14.5%	16.0%	57	12.9	44	16.7	1.7	1.6
20	PORTLAND	718	10.2	532	13.7	6.4%	7.3%	46	6.3	39	7.5	0.6	0.5
20	PUGET SOUND HCS	1,462	11.4	1,108	15.1	29.3%	33.8%	429	11.4	374	13.1	1.0	0.9
20	ROSEBURG HCS	843	12.8	595	18.2	22.4%	25.7%	189	21.7	153	26.8	1.7	1.5
20	SPOKANE	202	8.3	171	9.8	12.4%	14.0%	25	7.3	24	7.6	0.9	0.8
20	WALLA WALLA	105	4.8	89	5.7	15.2%	15.7%	16	4.1	14	4.6	0.8	0.8
21	CENTRAL CALIFORNIA HCS	401	6.3	276	9.1	6.5%	7.2%	26	3.4	20	4.4	0.5	0.5
21	HONOLULU	348	10	194	18.0	4.3%	7.2%	15	7.1	14	7.6	0.7	0.4
21	PALO ALTO HCS	1,442	14.5	950	22.0	4.4%	5.9%	64	11.2	56	12.8	0.8	0.6
21	SAN FRANCISCO	337	22.4	254	29.7	1.8%	2.4%	6	6.2	6	6.2	0.3	0.2
21	SIERRA NEVADA HCS	507	8.8	387	11.5	3.6%	4.4%	18	7.7	17	8.2	0.9	0.7
22	GREATER LOS ANGELES HCS	1,293	24.9	995	32.4	3.0%	3.7%	39	14.2	37	15.0	0.6	0.5
22	LOMA LINDA	777	8	532	11.7	4.8%	5.8%	37	7.2	31	8.5	0.9	0.7
22	LONG BEACH HCS	495	13.6	382	17.6	2.6%	2.9%	13	6.5	11	7.7	0.5	0.4
22	SAN DIEGO HCS	691	12.2	539	15.7	3.3%	3.9%	23	8.0	21	8.8	0.7	0.6
22	SOUTHERN NEVADA HCS	470	6.9	364	8.8	6.8%	7.7%	32	6.4	28	7.3	0.9	0.8

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VISN	VAMC	<u>All General Psychiatry Inpatient Care</u>				<u>Percent Tx. for PTSD</u>		<u>Inpatient Treatment of PTSD</u>				<u>PTSD/General Psych Ratio</u>	
		<i>Episodes</i>	<i>Bed Days/</i>	<i>Unique</i>	<i>Bed Days/</i>	<i>All</i>	<i>Unique</i>	<i>Episodes</i>	<i>Bed Days/</i>	<i>Unique</i>	<i>Bed Days/</i>	<u>of Bed Days per ...**</u>	
		<i>of Care</i>	<i>Episode</i>	<i>Veterans</i>	<i>Vet/Year</i>	<i>Episodes</i>	<i>Veterans</i>	<i>of Care</i>	<i>Episode</i>	<i>Veterans</i>	<i>Vet/Year</i>	<i>Episode</i>	<i>Vet/Year</i>
23	BLACK HILLS HCS	283	9.5	198	13.6	7.4%	9.1%	21	6.5	18	7.6	0.7	0.6
23	CENTRAL IOWA HCS	511	5.9	390	7.8	4.3%	5.4%	22	4.7	21	5.0	0.8	0.6
23	FARGO	282	6.6	196	9.5	1.8%	2.6%	5	4.2	5	4.2	0.6	0.4
23	IOWA CITY	320	10.5	262	12.8	2.5%	2.3%	8	4.8	6	6.3	0.5	0.5
23	MINNEAPOLIS	666	8.5	488	11.5	3.5%	4.3%	23	4.3	21	4.8	0.5	0.4
23	NEBRASKA- WESTERN IOWA HCS	431	10	347	12.4	4.2%	4.9%	18	6.7	17	7.1	0.7	0.6
23	SIOUX FALLS	197	5.8	162	7.0	2.0%	1.2%	4	2.5	2	5.0	0.4	0.7
23	ST CLOUD	761	4.9	434	8.6	3.7%	4.8%	28	4.0	21	5.3	0.8	0.6
ALL VA		87,002	12.8	58,705	16.7	7.8%	9.4%	6823	12.3	5492	15.2	1.0	0.9
AVERAGE		770	12.7	558	17.1	7.7%	8.7%	60	9.5	50	11.2	0.8	0.7
SD		443	8.4	301	10.9	7.4%	7.7%	73	5.8	59	7.0	0.3	0.3
CV		0.58	0.67	0.54	0.64	0.96	0.88	1.22	0.61	1.19	0.62	0.35	0.36

* Outlined values are greater than 1 SD from the mean in the undesirable direction.

** Ratio of beds of care for PTSD treatment compared to bed days of care for all general psychiatry inpatient treatment.

Table 12-2. Comparison of Domiciliary and PRRP Treatment and Treatment for PTSD, by VAMC, FY 2003.

VISN	VAMC	CODE	All Domiciliary and PRRP Care				Percent Tx. for PTSD		Domiciliary and PRRP Tx. of PTSD				PTSD/Dom. and PRRP	
			Episodes	Bed Days/	Unique	Bed Days/	All	Unique	Episodes	Bed Days/	Unique	Bed Days/	Ratio of Bed Days per ...*	
			of Care	Episode	Veterans	Vet/Year	Episodes	Veterans	of Care	Episode	Veterans	Vet/Year	Episode	Vet/Year
1	BEDFORD	518	330	51.7	306	55.8	9.7%	10.1%	32	68.5	31	70.7	1.3	1.3
1	BOSTON HCS	523	491	66.9	444	74.0	3.1%	3.4%	15	113.1	15	113.1	1.7	1.5
1	CONNECTICUT HCS	689	33	95.7	32	98.7	0.0%	0.0%						
1	NORTHAMPTON	631	31	172.4	30	178.1	0.0%	0.0%						
2	BATH	514	5	1.0	5	1.0	0.0%	0.0%						
2	WESTERN NEW YORK HCS	528	1,513	72.3	1,229	89.0	19.7%	18.3%	298	13.4	225	17.8	0.2	0.2
3	HUDSON VALLEY HCS	620	428	77.9	400	83.3	31.3%	32.8%	134	71.7	131	73.4	0.9	0.9
3	NEW JERSEY HCS	561	838	64.3	750	71.8	19.3%	20.7%	162	44.7	155	46.7	0.7	0.7
3	NEW YORK HARBOR HCS	630	724	35.2	602	42.3	1.0%	1.2%	7	15.9	7	15.9	0.5	0.4
3	NORTHPORT	632	104	108.5	99	113.9	26.0%	26.3%	27	87.2	26	90.5	0.8	0.8
4	BUTLER	529	196	85.6	195	86.0	0.0%	0.0%						
4	COATESVILLE	542	1,417	52.1	1,369	53.9	13.1%	13.1%	185	61.2	180	62.9	1.2	1.2
4	LEBANON	595	340	48.9	332	50.1	0.0%	0.0%						
4	PITTSBURGH HCS	646	480	54.8	453	58.1	0.8%	0.9%	4	25.3	4	25.3	0.5	0.4
4	WILKES BARRE	693	171	17.6	168	17.9	0.0%	0.0%						
5	MARTINSBURG	613	762	101.0	741	103.9	18.1%	18.6%	138	123.8	138	123.8	1.2	1.2
5	MARYLAND HCS	512	955	52.4	816	61.3	13.4%	14.7%	128	54.2	120	57.8	1.0	0.9
6	ASHEVILLE	637	225	25.1	215	26.3	0.4%	0.5%	1	6.0	1	6.0	0.2	0.2
6	HAMPTON	590	852	63.4	807	67.0	0.5%	0.5%	4	11.0	4	11.0	0.2	0.2
6	SALEM	658	218	24.4	213	25.0	0.0%	0.0%						
6	SALISBURY	659	317	39.5	316	39.6	0.0%	0.0%						
7	ATLANTA	508	26	163.7	26	163.7	0.0%	0.0%						
7	AUGUSTA	509	269	75.7	258	78.9	37.5%	37.2%	101	59.8	96	62.9	0.8	0.8
7	CENTRAL ALABAMA VETERANS HCS	619	25	31.0	25	31.0	24.0%	24.0%	6	23.3	6	23.3	0.8	0.8
7	DUBLIN	557	420	43.2	397	45.7	31.2%	30.7%	131	29.7	122	31.9	0.7	0.7
8	BAY PINES	516	497	73.3	446	81.7	22.3%	24.2%	111	54.6	108	56.1	0.7	0.7
8	MIAMI	546	259	72.0	244	76.5	33.2%	33.6%	86	67.3	82	70.6	0.9	0.9
8	NO. FL/SO. GA VETERANS HS	573	205	57.9	179	66.3	0.0%	0.0%						
8	TAMPA	673	48	151.3	48	151.3	8.3%	8.3%	4	174.0	4	174.0	1.1	1.1
9	MEMPHIS	614	309	12.8	302	13.1	0.6%	0.7%	2	14.0	2	14.0	1.1	1.1
9	MOUNTAIN HOME	621	541	129.9	518	135.7	2.0%	2.1%	11	107.8	11	107.8	0.8	0.8
10	CHILLICOTHE	538	820	25.6	643	32.7	2.3%	2.8%	19	13.4	18	14.1	0.5	0.4
10	CINCINNATI	539	574	49.9	469	61.0	13.1%	15.8%	75	42.1	74	42.6	0.8	0.7
10	CLEVELAND	541	1,166	32.3	1,032	36.4	1.7%	1.9%	20	98.9	20	98.9	3.1	2.7
10	DAYTON	552	393	55.6	378	57.8	9.7%	10.1%	38	68.3	38	68.3	1.2	1.2

Table 12-2. Comparison of Domiciliary and PRRP Treatment and Treatment for PTSD, by VAMC, FY 2003.

VISN VAMC	CODE	All Domiciliary and PRRP Care				Percent Tx. for PTSD		Domiciliary and PRRP Tx. of PTSD				PTSD/Dom. and PRRP	
		Episodes	Bed Days/	Unique	Bed Days/	All	Unique	Episodes	Bed Days/	Unique	Bed Days/	Ratio of Bed Days per ...*	
		of Care	Episode	Veterans	Vet/Year	Episodes	Veterans	of Care	Episode	Veterans	Vet/Year	Episode	Vet/Year
11 BATTLE CREEK	515	878	35.1	738	41.8	43.2%	41.6%	379	22.6	307	27.9	0.6	0.7
11 ILLIANA HCS	550	10	196.4	10	196.4	0.0%	0.0%						
11 INDIANAPOLIS	583	40	126.9	33	153.8	2.5%	3.0%	1	54.0	1	54.0	0.4	0.4
12 CHICAGO HCS	537	367	34.9	337	38.0	7.9%	7.7%	29	39.5	26	44.1	1.1	1.2
12 HINES	578	251	31.2	243	32.2	2.8%	2.9%	7	31.3	7	31.3	1.0	1.0
12 IRON MOUNTAIN	585	94	21.8	91	22.5	0.0%	0.0%						
12 MADISON	607	51	76.5	47	83.0	0.0%	0.0%						
12 MILWAUKEE	695	498	111.8	484	115.1	4.0%	4.1%	20	131.5	20	131.5	1.2	1.1
12 NORTH CHICAGO	556	818	54.6	744	60.0	30.0%	30.0%	245	33.4	223	36.7	0.6	0.6
12 TOMAH	676	300	35.8	258	41.6	24.7%	26.0%	74	49.3	67	54.5	1.4	1.3
15 HEARTLAND-EAST HCS	657	4	143.5	4	143.5	0.0%	0.0%						
15 HEARTLAND-WEST	589	461	145.1	445	150.3	2.0%	1.6%	9	174.6	7	224.4	1.2	1.5
16 CENTRAL ARKANSAS HCS	598	598	38.9	556	41.8	30.9%	33.3%	185	34.6	185	34.6	0.9	0.8
16 GULF COAST HCS	520	495	106.2	480	109.5	0.4%	0.4%	2	274.0	2	274.0	2.6	2.5
16 JACKSON	586	242	26.2	238	26.7	23.1%	22.7%	56	40.6	54	42.1	1.5	1.6
16 NEW ORLEANS	629	65	36.3	61	38.6	100.0%	100.0%	65	36.3	61	38.6	1.0	1.0
16 OKLAHOMA CITY	635	44	114.2	40	125.7	0.0%	0.0%						
17 CENTRAL TEXAS VETERANS HCS	674	736	121.7	698	128.3	18.8%	18.6%	138	88.5	130	94.0	0.7	0.7
17 NORTH TEXAS HCS	549	1,313	55.2	858	84.5	0.6%	0.9%	8	53.4	8	53.4	1.0	0.6
17 SOUTH TEXAS VETERANS HCS	671	454	14.6	429	15.5	0.2%	0.2%	1	16.0	1	16.0	1.1	1.0
18 NEW MEXICO HCS	501	125	58.9	111	66.4	0.0%	0.0%						
18 NORTHERN ARIZONA VA HCS	649	365	100.9	351	104.9	0.8%	0.9%	3	41.0	3	41.0	0.4	0.4
18 SOUTHERN ARIZONA	678	143	21.4	143	21.4	0.7%	0.7%	1	2.0	1	2.0	0.1	0.1
19 SALT LAKE CITY HCS	660	141	25.8	133	27.4	0.7%	0.8%	1	28.0	1	28.0	1.1	1.0
19 SHERIDAN	666	215	41.9	203	44.4	25.6%	26.1%	55	37.6	53	39.0	0.9	0.9
20 ALASKA HCS & RO	463	117	136.8	104	153.9	9.4%	8.7%	11	125.4	9	153.2	0.9	1.0
20 BOISE	531	142	17.7	141	17.9	0.0%	0.0%						
20 PUGET SOUND HCS	663	479	56.3	455	59.3	26.1%	27.0%	125	46.0	123	46.7	0.8	0.8
20 ROSEBURG HCS	653	207	25.9	198	27.1	0.5%	0.5%	1	18.0	1	18.0	0.7	0.7
20 WALLA WALLA	687	288	22.5	269	24.1	0.7%	0.7%	2	26.0	2	26.0	1.2	1.1
20 WHITE CITY	692	642	181.7	617	189.1	3.3%	3.4%	21	144.8	21	144.8	0.8	0.8
21 HONOLULU	459	36	59.7	36	59.7	97.2%	97.2%	35	59.7	35	59.7	1.0	1.0
21 PALO ALTO HCS	640	673	78.9	625	85.0	33.7%	35.2%	227	56.0	220	57.8	0.7	0.7
22 GREATER LOS ANGELES HCS	691	741	122.2	718	126.1	12.6%	12.8%	93	143.1	92	144.6	1.2	1.1

Table 12-2. Comparison of Domiciliary and PRRP Treatment and Treatment for PTSD, by VAMC, FY 2003.

VISN VAMC	CODE	<u>All Domiciliary and PRRP Care</u>				<u>Percent Tx. for PTSD</u>		<u>Domiciliary and PRRP Tx. of PTSD</u>				<u>PTSD/Dom. and PRRP</u>	
		Episodes of Care	Bed Days/ Episode	Unique Veterans	Bed Days/ Vet/Year	All Episodes	Unique Veterans	Episodes of Care	Bed Days/ Episode	Unique Veterans	Bed Days/ Vet/Year	<u>Ratio of Bed Days per ...*</u>	
23 BLACK HILLS HCS	568	517	87.7	469	96.6	10.6%	11.3%	55	99.7	53	103.4	1.1	1.1
23 CENTRAL IOWA HCS	555	1	94.0	1	94.0	0.0%	0.0%						
23 NEBRASKA- WESTERN IOWA HCS	636	830	32.0	683	38.9	9.2%	9.5%	76	37.4	65	43.8	1.2	1.1
23 ST CLOUD	656	853	54.2	792	58.4	12.0%	11.4%	102	56.6	90	64.1	1.0	1.1
ALL VA	568	30,216	64.0	26,158	73.9	12.5%	13.0%	3,766	53.0	3,399	58.7	0.8	0.8
AVERAGE		414	68.9	374	73.6	12.0%	12.2%	68	62.7	63	65.6	1.0	0.9
SD		353	45.1	304	46.6	18.8%	18.9%	83	51.4	73	54.3	0.5	0.5
CV		0.85	0.66	0.81	0.63	1.57	1.54	1.21	0.82	1.15	0.83	0.52	0.52

*Ratio of bed days of care for PTSD treatment compared to bed days of care for all general psychiatry inpatient treatment.

Data for TABLE 13 are not available for this fiscal year.

Table 14. Inpatient treatment received during the first six months after discharge among veterans discharged from VA psychiatric programs with a primary diagnosis of PTSD (October 1, 2002-March 31, 2003).*

VISN	Number of Unique Patients w PTSD Dx.	Average Length Of Stay (Index stay)	Bed Days 6 months After DC	Number of Admissions 6 months After D/C	% Readm. within 14 days	% Readm. within 30 days	% Readm. within 180 days	Days to Readm. First Year After D/C	Inpatient Summary Score Average Z: Weighted
1	320	15.2	5.9	0.38	4.7%	6.9%	26.9%	94.2	0.13
2	50	9.0	3.3	0.36	8.0%	12.0%	22.0%	62.4	0.18
3	77	10.9	3.9	0.25	3.9%	5.2%	19.5%	75.9	-0.47
4	98	10.0	3.4	0.38	5.1%	7.1%	20.4%	70.5	-0.07
5	53	7.7	4.6	0.34	7.5%	9.4%	22.6%	67.6	0.12
6	402	15.2	6.5	0.43	3.0%	7.0%	30.6%	83.8	0.50
7	231	8.3	4.1	0.43	3.5%	7.4%	31.2%	74.5	0.13
8	120	6.4	2.4	0.43	4.2%	10.0%	29.2%	79.1	-0.20
9	111	8.5	3.9	0.40	7.2%	10.8%	25.2%	55.4	0.44
10	53	8.0	2.5	0.36	3.8%	7.5%	24.5%	73.3	-0.34
11	57	10.4	3.4	0.35	3.5%	10.5%	24.6%	53.1	0.23
12	96	11.0	3.5	0.43	7.3%	12.5%	30.2%	66.9	0.46
15	151	34.6	6.3	0.43	4.6%	8.6%	26.5%	67.5	1.41 x
16	133	13.0	5.5	0.45	2.3%	5.3%	29.3%	88.4	0.19
17	125	16.2	5.1	0.47	4.8%	10.4%	28.0%	68.6	0.79 x
18	84	11.2	2.7	0.39	3.6%	9.5%	22.6%	57.1	0.15
19	116	9.7	3.1	0.22	4.3%	5.2%	14.7%	67.8	-0.61
20	299	14.9	3.3	0.32	2.0%	6.0%	23.4%	90.0	-0.46
21	52	8.4	1.5	0.21	0.0%	3.8%	19.2%	76.7	-1.14
22	63	8.8	4.3	0.38	6.3%	9.5%	23.8%	54.1	0.41
23	58	4.7	1.2	0.17	0.0%	1.7%	13.8%	96.5	-1.83
ALL VA	2,749	13.1	4.4	0.38	4.0%	7.6%	25.9%	77.6	0.15
AVERAGE	131	11.5	3.8	0.36	4.3%	7.9%	24.2%	72.5	0.00
SD	99	6.1	1.4	0.08	2.2%	2.8%	4.9%	12.8	0.68
CV	0.76	0.5	0.4	0.23	0.52	0.35	0.20	0.18	

* Outlined values are 1 SD from the mean and reflect high levels of inpatient service use.

Table 15. Inpatient treatment received during the first six months after discharge among veterans discharged from VA psychiatric programs with a primary diagnosis of PTSD (October 1, 2002-March 31, 2003), by VAMC.*

VISN	STATION	CODE	Number of Unique Patients w PTSD Dx.	Average Length Of Stay (Index stay)	Bed Days 6 months After DC	Number of Admissions 6 months After D/C	% Readm. within 14 days	% Readm. within 30 days	% Readm. within 180 days	Days to Readm. First Year After D/C
1	BEDFORD	518	8	8.9	3.63	0.63	12.5%	25.0%	50.0%	78.25
1	BOSTON HCS	523	43	12.1	4.33	0.37	9.3%	11.6%	27.9%	73.42
1	CONNECTICUT HCS	689	17	9.0	10.24	0.82	5.9%	5.9%	47.1%	87.75
1	NORTHAMPTON	631	200	18.5	5.66	0.26	2.5%	3.5%	23.5%	117.04
1	PROVIDENCE	650	16	11.6	12.13	0.88	6.3%	18.8%	31.3%	40.80
1	TOGUS	402	1	7.0	0.00	0.00	0.0%	0.0%	0.0%	
1	WHITE RIVER JCT	405	35	7.1	4.74	0.57	8.6%	11.4%	28.6%	49.80
2	ALBANY	500	8	6.5	3.25	0.38	12.5%	12.5%	12.5%	1.00
2	CANANDAIGUA	532	3	16.3	0.00	0.00	0.0%	0.0%	0.0%	
2	SYRACUSE	670	14	8.6	2.14	0.14	7.1%	7.1%	14.3%	57.50
2	WESTERN NEW YORK HCS	528	25	9.2	4.36	0.52	8.0%	16.0%	32.0%	71.25
3	BRONX	526	18	17.1	6.11	0.56	5.6%	11.1%	38.9%	70.14
3	HUDSON VALLEY HCS	620	20	8.7	6.10	0.10	5.0%	5.0%	10.0%	65.00
3	NEW JERSEY HCS	561	22	9.4	1.77	0.18	4.5%	4.5%	18.2%	64.25
3	NEW YORK HARBOR HCS	630	14	9.6	2.14	0.21	0.0%	0.0%	14.3%	130.50
3	NORTHPORT	632	3	6.7	0.00	0.00	0.0%	0.0%	0.0%	
4	CLARKSBURG	540	9	7.1	1.00	0.22	11.1%	11.1%	22.2%	91.00
4	COATESVILLE	542	22	15.6	4.50	0.50	4.5%	9.1%	31.8%	56.43
4	LEBANON	595	10	9.2	5.10	0.60	10.0%	10.0%	20.0%	21.00
4	PHILADELPHIA	642	15	14.7	3.67	0.33	0.0%	0.0%	26.7%	121.00
4	PITTSBURGH HCS	646	33	5.8	1.55	0.18	3.0%	6.1%	9.1%	69.67
4	WILKES BARRE	693	9	7.7	8.11	0.78	11.1%	11.1%	22.2%	49.00
5	MARTINSBURG	613	27	7.9	3.67	0.30	11.1%	11.1%	18.5%	45.40
5	MARYLAND HCS	512	15	8.1	1.07	0.27	0.0%	0.0%	26.7%	124.00
5	WASHINGTON DC	688	11	7.0	11.55	0.55	9.1%	18.2%	27.3%	29.33
6	ASHEVILLE	637	44	8.3	3.66	0.43	2.3%	4.5%	34.1%	104.27
6	DURHAM	558	41	7.4	1.66	0.24	0.0%	4.9%	17.1%	75.57
6	FAYETTEVILLE NC	565	25	7.1	2.68	0.52	0.0%	12.0%	32.0%	75.50
6	HAMPTON	590	82	8.8	5.73	0.71	8.5%	11.0%	37.8%	76.35
6	RICHMOND	652	1	1.0	0.00	0.00	0.0%	0.0%	0.0%	
6	SALEM	658	118	10.0	14.52	0.51	2.5%	8.5%	47.5%	87.04
6	SALISBURY	659	91	36.9	1.56	0.13	1.1%	2.2%	6.6%	62.33
7	ATLANTA	508	47	8.5	2.66	0.28	2.1%	8.5%	19.1%	62.56
7	AUGUSTA	509	78	8.1	3.55	0.44	3.8%	7.7%	35.9%	81.18
7	CENTRAL ALABAMA VETERANS HCS	619	47	9.2	6.91	0.70	6.4%	10.6%	42.6%	68.70
7	CHARLESTON	534	13	5.6	1.85	0.15	0.0%	0.0%	15.4%	104.00
7	COLUMBIA SC	544	32	6.8	4.72	0.50	3.1%	6.3%	37.5%	74.92
7	TUSCALOOSA	679	14	11.1	2.64	0.14	0.0%	0.0%	7.1%	44.00

Table 15. Inpatient treatment received during the first six months after discharge among veterans discharged from VA psychiatric programs with a primary diagnosis of PTSD (October 1, 2002-March 31, 2003), by VAMC.*

VISN	STATION	CODE	Number of Unique Patients w PTSD Dx.	Average Length Of Stay (Index stay)	Bed Days 6 months After DC	Number of Admissions 6 months After D/C	% Readm. within 14 days	% Readm. within 30 days	% Readm. within 180 days	Days to Readm. First Year After D/C
8	BAY PINES	516	19	6.3	1.32	0.32	5.3%	10.5%	31.6%	108.17
8	MIAMI	546	8	7.1	0.00	0.00	0.0%	0.0%	0.0%	
8	NO. FL/SO. GA VETERANS HS	573	29	4.0	1.10	0.28	3.4%	10.3%	20.7%	36.50
8	SAN JUAN PR	672	13	10.2	5.08	0.77	7.7%	7.7%	30.8%	81.00
8	TAMPA	673	21	9.6	2.90	0.33	4.8%	9.5%	28.6%	92.33
8	W PALM BEACH	548	30	4.8	3.27	0.67	3.3%	13.3%	43.3%	78.54
9	LEXINGTON	596	12	5.3	0.00	0.00	0.0%	0.0%	0.0%	
9	LOUISVILLE	603	9	4.7	0.33	0.11	0.0%	0.0%	11.1%	43.00
9	MEMPHIS	614	26	8.8	1.50	0.35	3.8%	15.4%	26.9%	33.43
9	MIDDLE TENN HCS	626	34	10.9	8.09	0.56	11.8%	14.7%	32.4%	50.91
9	MOUNTAIN HOME	621	30	7.8	3.87	0.50	10.0%	10.0%	30.0%	79.44
10	CHILLICOTHE	538	17	4.3	0.00	0.00	0.0%	0.0%	0.0%	
10	CINCINNATI	539	14	8.8	5.43	0.79	7.1%	21.4%	64.3%	76.22
10	CLEVELAND	541	9	11.2	1.44	0.22	0.0%	0.0%	11.1%	121.00
10	DAYTON	552	13	9.8	3.23	0.46	7.7%	7.7%	23.1%	48.67
11	ALLEN PARK	553	9	4.9	2.56	0.44	11.1%	11.1%	22.2%	30.00
11	ANN ARBOR HCS	506	9	8.4	2.78	0.44	0.0%	11.1%	33.3%	42.33
11	BATTLE CREEK	515	23	9.0	1.22	0.30	0.0%	8.7%	21.7%	67.60
11	ILLIANA HCS	550	4	9.3	0.00	0.00	0.0%	0.0%	0.0%	
11	INDIANAPOLIS	583	6	4.8	1.17	0.17	0.0%	0.0%	16.7%	93.00
11	NORTHERN INDIANA HCS	610	6	32.8	18.50	0.67	16.7%	33.3%	50.0%	42.00
12	CHICAGO HCS	537	43	10.5	4.95	0.49	11.6%	18.6%	37.2%	59.00
12	HINES	578	11	7.7	3.00	0.64	0.0%	9.1%	36.4%	89.25
12	MADISON	607	8	7.0	3.63	0.50	0.0%	12.5%	25.0%	75.50
12	MILWAUKEE	695	17	5.2	1.47	0.24	5.9%	5.9%	17.6%	65.00
12	NORTH CHICAGO	556	12	29.8	2.67	0.42	8.3%	8.3%	33.3%	73.25
12	TOMAH	676	5	3.6	0.00	0.00	0.0%	0.0%	0.0%	
15	COLUMBIA MO	543	10	8.5	3.40	0.40	0.0%	0.0%	20.0%	110.00
15	EASTERN KANSAS HCS	677	111	44.4	7.75	0.47	4.5%	8.1%	28.8%	67.56
15	HEARTLAND-EAST HCS	657	22	7.1	2.64	0.36	9.1%	18.2%	22.7%	27.40
15	HEARTLAND-WEST	589	8	7.0	0.13	0.13	0.0%	0.0%	12.5%	179.00
16	ALEXANDRIA	502	2	20.5	3.50	1.00	0.0%	0.0%	50.0%	77.00
16	CENTRAL ARKANSAS HCS	598	41	20.3	11.41	0.76	2.4%	4.9%	46.3%	86.79
16	FAYETTEVILLE AR	564	10	14.2	12.60	1.00	0.0%	10.0%	60.0%	97.83
16	GULF COAST HCS	520	6	9.7	0.00	0.00	0.0%	0.0%	0.0%	
16	HOUSTON	580	31	9.6	2.61	0.35	6.5%	12.9%	25.8%	58.38
16	JACKSON	586	11	11.8	0.27	0.09	0.0%	0.0%	9.1%	177.00
16	NEW ORLEANS	629	12	5.1	0.08	0.08	0.0%	0.0%	8.3%	148.00
16	OKLAHOMA CITY	635	14	9.9	2.86	0.29	0.0%	0.0%	21.4%	114.33
16	SHREVEPORT	667	6	5.0	0.00	0.00	0.0%	0.0%	0.0%	

Table 15. Inpatient treatment received during the first six months after discharge among veterans discharged from VA psychiatric programs with a primary diagnosis of PTSD (October 1, 2002-March 31, 2003), by VAMC.*

VISN	STATION	CODE	Number of Unique Patients w PTSD Dx.	Average Length Of Stay (Index stay)	Bed Days 6 months After DC	Number of Admissions 6 months After D/C	% Readm. within 14 days	% Readm. within 30 days	% Readm. within 180 days	Days to Readm. First Year After D/C
17	CENTRAL TEXAS VETERANS HCS	674	53	24.9	7.11	0.47	5.7%	9.4%	28.3%	56.80
17	NORTH TEXAS HCS	549	8	6.3	0.50	0.13	0.0%	0.0%	12.5%	102.00
17	SOUTH TEXAS VETERANS HCS	671	64	10.2	4.09	0.52	4.7%	12.5%	29.7%	76.16
18	NEW MEXICO HCS	501	14	5.6	2.07	0.21	0.0%	0.0%	21.4%	93.67
18	PHOENIX	644	28	8.2	4.32	0.71	7.1%	17.9%	42.9%	57.92
18	SOUTHERN ARIZONA	678	42	15.0	1.83	0.24	2.4%	7.1%	9.5%	27.00
19	DENVER	554	72	5.5	2.15	0.11	2.8%	4.2%	6.9%	51.80
19	GRAND JUNCTION	575	6	4.3	12.33	0.83	16.7%	16.7%	50.0%	56.00
19	MONTANA HCS	436	1	8.0	0.00	0.00	0.0%	0.0%	0.0%	
19	SALT LAKE CITY HCS	660	19	6.7	2.37	0.37	5.3%	5.3%	21.1%	54.25
19	SHERIDAN	666	18	31.1	4.56	0.33	5.6%	5.6%	27.8%	101.80
20	BOISE	531	25	14.8	3.04	0.64	0.0%	20.0%	40.0%	69.10
20	PORTLAND	648	19	6.6	2.16	0.32	0.0%	0.0%	26.3%	133.80
20	PUGET SOUND HCS	663	163	11.9	2.04	0.25	2.5%	5.5%	17.2%	63.39
20	ROSEBURG HCS	653	78	24.5	6.54	0.37	2.6%	3.8%	29.5%	121.83
20	SPOKANE	668	11	6.7	1.09	0.18	0.0%	0.0%	18.2%	141.00
20	WALLA WALLA	687	3	8.7	6.00	0.67	0.0%	33.3%	66.7%	40.00
21	CENTRAL CALIFORNIA HCS	570	9	3.7	0.44	0.11	0.0%	0.0%	11.1%	100.00
21	HONOLULU	459	6	8.2	0.00	0.00	0.0%	0.0%	0.0%	
21	PALO ALTO HCS	640	24	10.9	2.21	0.29	0.0%	4.2%	25.0%	81.00
21	SAN FRANCISCO	662	2	3.0	0.00	0.00	0.0%	0.0%	0.0%	
21	SIERRA NEVADA HCS	654	11	8.1	2.00	0.27	0.0%	9.1%	27.3%	60.33
22	GREATER LOS ANGELES HCS	691	20	13.2	4.40	0.25	5.0%	10.0%	20.0%	48.75
22	LOMA LINDA	605	18	6.8	3.56	0.22	0.0%	0.0%	16.7%	89.67
22	LONG BEACH HCS	600	4	8.3	5.75	0.50	0.0%	0.0%	50.0%	51.00
22	SAN DIEGO HCS	664	7	8.3	4.43	0.43	0.0%	0.0%	28.6%	100.00
22	SOUTHERN NEVADA HCS	593	14	5.7	4.57	0.71	21.4%	28.6%	28.6%	11.50
23	BLACK HILLS HCS	568	9	7.6	4.67	0.22	0.0%	11.1%	22.2%	97.50
23	CENTRAL IOWA HCS	555	15	4.6	0.60	0.20	0.0%	0.0%	6.7%	43.00
23	FARGO	437	3	3.7	0.00	0.00	0.0%	0.0%	0.0%	
23	IOWA CITY	584	3	3.7	1.33	0.33	0.0%	0.0%	33.3%	51.00
23	MINNEAPOLIS	618	10	5.0	0.20	0.10	0.0%	0.0%	10.0%	50.00
23	NEBRASKA- WESTERN IOWA HCS	636	7	5.0	0.00	0.00	0.0%	0.0%	0.0%	
23	SIOUX FALLS	438	1	1.0	0.00	0.00	0.0%	0.0%	0.0%	
23	ST CLOUD	656	10	3.0	1.30	0.30	0.0%	0.0%	30.0%	144.33
ALL VA			2749	13.1	4.43	0.38	4.0%	7.6%	25.9%	77.65
AVERAGE			24	9.8	3.39	0.34	3.5%	6.9%	23.0%	75.35
SD			31	6.9	3.40	0.25	4.5%	7.4%	15.5%	33.49
CV			1.26	0.71	1.00	0.73	1.28	1.07	0.68	0.44

* Outlined values are 1 SD from the mean in the undesirable direction, and reflect high levels of inpatient service use.

Table 16. Outpatient treatment received during the first six months after discharge by veterans discharged from VA psychiatric programs with a primary diagnosis of PTSD (October 1, 2002-March 31, 2003.)*

VISN	Any Psych. Outpatient Visit in 6 mos. After DC	Any Psych. Outpatient Visit in 30 Days After DC	Days to 1st OP Visit in 6 mos. After DC	Number of Visits in 6 mos. Among those w any Visits	Continuity: Bi-months with 2 Visits	Dually Diagnosed: Psychiatric & SA Disorders	Any SA Outpatient Visit in 30 Days After DC	Number of SA OP Visits Among those w any Visits	Outpatient Summary Score Average Z Score
1	93.4%	67.8%	27.08	13.31	2.45	55.0%	9.7%	11.98	-0.31
2	88.0%	60.0%	29.84	42.34	2.54	40.0%	12.0%	14.31	-0.15
3	87.0%	68.8%	25.27	28.55	2.39	62.3%	22.1%	37.44	0.19
4	91.8%	71.4%	26.50	11.66	2.43	60.2%	16.3%	17.79	-0.14
5	92.5%	79.2%	19.98	24.16	2.51	60.4%	24.5%	22.41	0.69
6	86.3%	56.7%	33.06	10.36	2.41	29.6%	5.5%	13.28	-1.09
7	91.8%	66.2%	32.00	16.81	2.52	39.0%	11.7%	20.96	-0.19
8	91.7%	73.3%	21.09	9.41	2.53	44.2%	11.7%	35.52	0.35
9	90.1%	64.9%	28.46	7.24	2.32	32.4%	3.6%	8.33	-0.99
10	96.2%	75.5%	16.37	20.80	2.34	47.2%	26.4%	23.57	0.59
11	84.2%	61.4%	23.00	16.96	2.39	49.1%	21.1%	11.41	-0.56
12	91.7%	70.8%	20.88	34.19	2.47	67.7%	32.3%	31.59	0.83
15	92.7%	70.9%	25.01	16.58	2.42	53.0%	14.6%	35.69	0.20
16	89.5%	69.9%	24.39	16.67	2.45	46.6%	11.3%	13.94	-0.27
17	88.0%	72.0%	23.52	9.00	2.42	36.8%	8.8%	18.91	-0.40
18	85.7%	60.7%	29.64	13.51	2.36	44.0%	9.5%	16.86	-0.89
19	94.8%	87.1%	8.81	25.33	2.62	39.7%	10.3%	20.62	1.09
20	91.3%	70.6%	23.06	12.51	2.44	48.5%	16.4%	21.59	0.00
21	90.4%	65.4%	22.74	15.53	2.52	46.2%	9.6%	2.29	-0.38
22	90.5%	65.1%	24.82	21.14	2.38	44.4%	14.3%	12.67	-0.35
23	98.3%	91.4%	11.89	54.77	2.62	53.4%	25.9%	13.96	1.78
All VA	90.6%	68.3%	25.39	16.59	2.45	45.5%	12.8%	20.33	0.00
AVG	90.8%	70.0%	23.7	20.0	2.45	47.6%	15.1%	19.3	0.00
SD	3.5%	8.4%	6.0	11.8	0.08	9.9%	7.6%	9.3	0.71
CV	0.04	0.12	0.25	0.59	0.03	0.21	0.50	0.48	

* Outlined values are 1 SD from the mean (in the undesirable direction) of all VAMCs, and reflect low outpatient service use after discharge from inpatient treatment.

Table 16A. Deviation of outpatient continuity of care from that of the median VISN over the first six months of treatment in FY 2003, among patients with PTSD (ICD-9 code 309.81), by VISN, (adjusted for patient characteristics, distance of residence from VA, diagnosis, etc.).

VISN	Number of O/P Stops	Number of Days with O/P Stops	Continuity: Bi-months with 2 stops	Continuity: Months with any stops	Dropout (6 months with no O/P visit)	Continuity of Care Index	Modified MCI	Number of Providers	Summary Continuity of Outpatient Care (Avg Z)
VISN Median	14.39	12.02	2.58	4.07	0.12	0.59	0.81	2.58	
VA National Avg.	14.03	10.88	2.60	4.08	0.12	0.58	0.80	2.66	
1	0.50	0.71	0.04	0.13	-0.01	0.03 X	0.04	-0.07	0.63
2	2.60	1.32	0.10	0.30	-0.04	0.01 X	0.04	0.03	1.30
3	4.36	3.43	0.13	0.37	-0.02	0.07 X	0.07	-0.18	1.85
4	-3.28 X	-2.40 X	0.02	-0.08 X	-0.01	0.01	0.01	-0.31	-0.17
5	0.50	0.32	-0.07 X	-0.18 X	0.03 X	0.02 X	0.02	0.02	-0.38
6	-3.75 X	-2.50 X	-0.05 X	-0.33 X	0.01	0.01	-0.01 X	-0.31	-0.78
7	-0.37	-1.10 X	-0.05 X	-0.22 X	0.00	-0.10	-0.08 X	0.41	-0.91
8	-2.57 X	-1.79 X	-0.01	-0.19 X	-0.01	0.01		-0.19	-0.34
9	-3.79 X	-3.15 X	-0.06 X	-0.35 X	0.00	-0.08	-0.09 X	-0.11	-1.34
10	0.88			0.01	0.00	-0.04	-0.01	0.26	-0.08
11	-0.12	-0.37	0.00		0.01	-0.06	-0.03 X	0.35	-0.35
12	4.90	1.94	0.06	0.17	-0.01	-0.01	0.02	0.22	0.88
15	0.95	0.33	0.04	0.07	-0.01	-0.04	-0.03 X	0.09	0.22
16	-2.38 X	-1.71 X	-0.02	-0.21 X	-0.01	-0.07	-0.06 X		-0.76
17	-1.97 X	-0.99 X	-0.03 X	-0.11 X	0.00	0.00	-0.01 X	-0.16	-0.38
18	-2.94 X	-2.03 X	-0.03 X	-0.18 X	0.02 X	-0.04	-0.03 X	0.07	-0.87
19	0.23	0.06	0.05	0.18	0.02 X		0.03	-0.04	0.27
20	-2.23 X	-0.99 X	0.05	0.11		0.08 X	0.06	-0.38	0.47
21		0.26	0.04	0.09	0.01 X	0.03 X	0.03	-0.15	0.32
22	1.02	1.26	0.04	0.08	0.00	0.00	0.01	0.09	0.37
23	3.93	0.03	-0.01	-0.09 X	-0.01	-0.05	-0.01 X	0.38	0.09

X = Significantly different ($p < .05$) from median VISN in the undesired direction, after adjustment for differences in patient characteristics, distance of residence from VA, diagnosis, etc.

Table 16B. Outpatient continuity of care over the first six months of treatment in FY 2003 among patients with PTSD (ICD-9 code 309.81), by VISN.

VISN	N	Number of O/P Stops	Number of Days with O/P Stops	Continuity: Bi-months with 2 stops	Continuity: Months with any stops	Dropout (6 months with no O/P visit)	Continuity of Care Index	Modified MCI	Number of Providers
1	6,859	14.72	12.00	2.63	4.26	0.11	0.62	0.84	2.55
2	3,350	16.80	12.62	2.69	4.43	0.09	0.61	0.85	2.65
3	5,100	19.01	14.95	2.71	4.46	0.10	0.67	0.87	2.45
4	5,373	10.30	8.50	2.60	4.02	0.11	0.60	0.81	2.31
5	2,363	20.30	15.00	2.55	4.10	0.16	0.56	0.82	3.25
6	5,208	8.83	7.81	2.52	3.73	0.13	0.60	0.79	2.22
7	7,961	13.50	10.05	2.54	3.89	0.13	0.48	0.73	3.05
8	6,815	10.11	8.63	2.56	3.87	0.11	0.61	0.81	2.31
9	3,892	7.19	6.18	2.49	3.63	0.12	0.53	0.71	2.24
10	3,908	16.60	12.03	2.58	4.14	0.14	0.53	0.79	3.07
11	2,814	13.54	10.53	2.57	4.07	0.14	0.53	0.77	2.94
12	3,276	22.62	15.16	2.66	4.39	0.11	0.55	0.82	3.22
15	3,899	13.64	10.61	2.61	4.09	0.11	0.56	0.77	2.59
16	8,281	11.23	9.18	2.56	3.87	0.12	0.52	0.74	2.58
17	4,409	10.96	9.53	2.55	3.95	0.13	0.60	0.79	2.33
18	4,824	10.29	8.61	2.57	3.92	0.14	0.55	0.77	2.63
19	3,403	13.68	10.92	2.64	4.28	0.14	0.59	0.83	2.55
20	6,828	11.92	10.12	2.64	4.21	0.12	0.66	0.86	2.31
21	5,308	14.39	11.49	2.61	4.15	0.15	0.63	0.84	2.47
22	5,122	14.97	12.42	2.62	4.17	0.13	0.59	0.81	2.73
23	3,665	20.03	12.18	2.61	4.11	0.11	0.52	0.79	3.30
ALL VA	102,658	13.48	10.60	2.59	4.06	0.12	0.58	0.80	2.61
Avg.	4,888	14.03	10.88	2.60	4.08	0.12	0.58	0.80	2.66
S.D.	1,665	4.06	2.40	0.05	0.22	0.02	0.05	0.04	0.35
C.V	0.34	0.29	0.22	0.02	0.05	0.13	0.08	0.05	0.13

Table 17. Outpatient treatment received during the first six months after discharge by veterans discharged from VA psychiatric programs with a primary diagnosis of PTSD (October 1, 2002-March 31, 2003). *

VISN	STATION	CODE	Any Psych. Outpatient Visit in 6 mos. After DC	Any Psych. Outpatient Visit in 30 Days After DC	Days to 1st OP Visit in 6 mos. After DC	Number of Visits in 6 mos. Among those w Any Visits	Continuity: Bi-months with 2 Visits	Dually Diagnosed: PTSD and SA Disorder	Any SA Outpatient Visit in 30 days After DC	Number of SA OP Visits in 6 mos. Among those w Any Visits
1	BEDFORD	518	100.0%	75.0%	18.3	34.8	2.8	37.5%	25.0%	23.5
1	BOSTON HCS	523	90.7%	72.1%	24.3	17.4	2.4	81.4%	14.0%	10.3
1	CONNECTICUT HCS	689	88.2%	70.6%	28.3	25.9	2.4	76.5%	64.7%	16.7
1	NORTHAMPTON	631	93.5%	61.5%	30.8	9.4	2.4	53.5%	4.5%	9.3
1	PROVIDENCE	650	100.0%	93.8%	9.7	19.1	2.8	62.5%	6.3%	1.0
1	TOGUS	402	100.0%	0.0%	131.0	1.0	2.0	0.0%	0.0%	
1	WHITE RIVER JCT	405	94.3%	85.7%	16.5	17.5	2.7	22.9%	5.7%	15.3
2	ALBANY	500	75.0%	50.0%	30.0	7.5	2.4	12.5%	12.5%	5.0
2	SYRACUSE	670	100.0%	100.0%	5.7	112.0	3.0	33.3%	33.3%	39.0
2	WESTERN NEW YORK HCS	528	100.0%	64.3%	32.0	25.0	2.6	35.7%	7.1%	14.3
3	BRONX	526	84.0%	56.0%	31.8	53.9	2.5	52.0%	12.0%	12.4
3	CANANDAIGUA	532	94.4%	66.7%	25.5	27.2	2.7	61.1%	16.7%	45.4
3	HUDSON VALLEY HCS	620	75.0%	60.0%	27.9	38.7	2.1	80.0%	25.0%	37.4
3	NEW JERSEY HCS	561	95.5%	81.8%	20.9	26.5	2.6	59.1%	31.8%	45.3
3	NEW YORK HARBOR HCS	630	78.6%	57.1%	34.1	20.3	1.9	57.1%	14.3%	5.8
3	NORTHPORT	632	100.0%	100.0%	9.0	30.3	3.0	0.0%	0.0%	
4	CLARKSBURG	540	100.0%	100.0%	10.2	6.0	2.3	66.7%	0.0%	
4	COATESVILLE	542	90.9%	45.5%	43.7	18.4	2.5	81.8%	13.6%	14.7
4	LEBANON	595	90.0%	90.0%	9.8	15.1	2.4	40.0%	10.0%	7.0
4	PHILADELPHIA	642	93.3%	66.7%	27.4	8.2	2.7	60.0%	26.7%	18.7
4	PITTSBURGH HCS	646	93.9%	75.8%	27.2	10.4	2.4	57.6%	24.2%	21.5
4	WILKES BARRE	693	77.8%	77.8%	14.9	7.6	2.2	33.3%	0.0%	
5	MARTINSBURG	613	88.9%	66.7%	33.1	10.3	2.3	59.3%	18.5%	7.3
5	MARYLAND HCS	512	93.3%	86.7%	10.2	35.0	2.7	80.0%	20.0%	38.0
5	WASHINGTON	688	100.0%	100.0%	3.7	40.5	2.8	36.4%	45.5%	29.7
6	ASHEVILLE	637	93.2%	54.5%	37.5	5.9	2.6	22.7%	0.0%	1.0
6	DURHAM	558	80.5%	43.9%	39.1	7.9	2.1	53.7%	4.9%	8.3
6	FAYETTEVILLE NC	565	84.0%	48.0%	34.6	12.6	2.1	28.0%	4.0%	15.0
6	HAMPTON	590	73.2%	51.2%	34.0	19.3	2.2	70.7%	13.4%	20.6
6	SALEM	658	100.0%	0.0%	66.0	10.0	3.0	0.0%	0.0%	
6	SALISBURY	659	89.8%	55.9%	36.8	6.6	2.5	9.3%	4.2%	6.3

Table 17. Outpatient treatment received during the first six months after discharge by veterans discharged from VA psychiatric programs with a primary diagnosis of PTSD (October 1, 2002-March 31, 2003). *

VISN	STATION	CODE	Any Psych. Outpatient Visit in 6 mos. After DC	Any Psych. Outpatient Visit in 30 Days After DC	Days to 1st OP Visit in 6 mos. After DC	Number of Visits in 6 mos. Among those w Any Visits	Continuity: Bi-months with 2 Visits	Dually Diagnosed: PTSD and SA Disorder	Any SA Outpatient Visit in 30 days After DC	Number of SA OP Visits in 6 mos. Among those w Any Visits
7	ATLANTA	508	93.4%	72.5%	22.4	11.4	2.7	12.1%	3.3%	2.0
7	AUGUSTA	509	91.5%	66.0%	26.3	13.5	2.5	57.4%	23.4%	13.4
7	CENTRAL ALABAMA VETERANS HCS	619	85.9%	62.8%	30.3	24.5	2.6	32.1%	2.6%	17.8
7	CHARLESTON	534	93.6%	61.7%	39.9	14.7	2.4	31.9%	12.8%	42.4
7	COLUMBIA SC	544	100.0%	69.2%	42.8	8.2	2.4	46.2%	7.7%	33.0
7	TUSCALOOSA	679	96.9%	78.1%	33.1	12.0	2.6	37.5%	12.5%	13.2
8	BAY PINES	516	100.0%	71.4%	20.1	15.4	2.7	35.7%	21.4%	21.5
8	MIAMI	546	84.2%	57.9%	26.4	11.3	2.5	63.2%	26.3%	17.6
8	N. FLORIDA/S. GEORGIA VETERANS HS	573	100.0%	87.5%	27.4	6.8	2.8	50.0%	37.5%	46.0
8	SAN JUAN	672	93.1%	69.0%	23.0	7.0	2.6	24.1%	3.4%	139.5
8	TAMPA	673	100.0%	100.0%	7.7	8.8	2.7	15.4%	0.0%	4.0
8	W PALM BEACH	548	95.2%	71.4%	23.4	6.0	2.6	52.4%	9.5%	52.0
9	LEXINGTON	596	86.7%	73.3%	18.8	14.5	2.3	56.7%	10.0%	20.9
9	LOUISVILLE	603	91.7%	58.3%	29.6	13.6	2.9	16.7%	8.3%	2.0
9	MEMPHIS	614	88.9%	33.3%	47.8	3.6	2.1	33.3%	0.0%	
9	MIDDLE TENNESSEE HCS	626	88.5%	73.1%	25.3	9.7	2.0	38.5%	3.8%	1.3
9	MOUNTAIN HOME	621	91.2%	61.8%	25.5	6.1	2.4	38.2%	2.9%	6.0
10	CHILLICOTHE	538	90.0%	73.3%	28.4	4.9	2.3	26.7%	3.3%	25.5
10	CINCINNATI	539	100.0%	70.6%	13.4	13.6	2.4	41.2%	17.6%	56.7
10	CLEVELAND	541	100.0%	64.3%	28.2	9.3	2.4	71.4%	35.7%	7.1
10	DAYTON	552	100.0%	100.0%	8.8	14.1	2.1	33.3%	44.4%	50.0
11	ANN ARBOR HCS	506	84.6%	76.9%	12.2	52.0	2.4	38.5%	15.4%	11.0
11	BATTLE CREEK	515	88.9%	44.4%	30.3	14.8	2.2	66.7%	22.2%	10.0
11	DETROIT	553	88.9%	66.7%	17.0	18.0	3.0	44.4%	55.6%	16.8
11	ILLIANA HCS	550	82.6%	65.2%	23.9	12.2	2.3	52.2%	8.7%	4.8
11	INDIANAPOLIS	583	100.0%	100.0%	8.8	10.0	2.3	50.0%	25.0%	27.0
11	NORTHERN INDIANA HCS †	610	83.3%	50.0%	37.2	49.0	2.3	50.0%	0.0%	
12	CHICAGO HCS	537	66.7%	50.0%	12.8	8.8	2.0	16.7%	33.3%	6.0
12	HINES	578	83.7%	72.1%	14.3	52.1	2.2	81.4%	44.2%	43.4
12	MADISON	607	100.0%	72.7%	21.1	18.7	2.7	54.5%	36.4%	29.0
12	MILWAUKEE	695	100.0%	62.5%	30.1	10.1	2.8	25.0%	25.0%	32.0
12	NORTH CHICAGO	556	94.1%	76.5%	20.1	29.9	2.6	64.7%	29.4%	6.7
12	TOMAH	676	100.0%	58.3%	32.1	18.2	2.8	58.3%	8.3%	7.5

Table 17. Outpatient treatment received during the first six months after discharge by veterans discharged from VA psychiatric programs with a primary diagnosis of PTSD (October 1, 2002-March 31, 2003). *

VISN	STATION	CODE	Any Psych. Outpatient Visit in 6 mos. After DC	Any Psych. Outpatient Visit in 30 Days After DC	Days to 1st OP Visit in 6 mos. After DC	Number of Visits in 6 mos. Among those w Any Visits	Continuity: Bi-months with 2 Visits	Dually Diagnosed: PTSD and SA Disorder	Any SA Outpatient Visit in 30 days After DC	Number of SA OP Visits in 6 mos. Among those w Any Visits
15	COLUMBIA MO	543	100.0%	80.0%	29.0	30.0	2.4	80.0%	0.0%	18.0
15	EASTERN KANSAS HCS	677	100.0%	60.0%	34.2	6.4	2.5	40.0%	20.0%	36.3
15	HEARTLAND-EAST HCS	657	91.0%	73.9%	22.7	18.0	2.4	59.5%	14.4%	34.3
15	HEARTLAND-WEST HCS	589	95.5%	63.6%	33.3	19.0	2.7	36.4%	18.2%	41.8
16	ALEXANDRIA	502	100.0%	62.5%	20.6	4.9	2.3	25.0%	0.0%	
16	CENTRAL ARKANSAS VETERANS HCS	598	100.0%	50.0%	42.0	20.0	2.5	100.0%	50.0%	42.0
16	FAYETTEVILLE AR	564	87.8%	53.7%	34.8	10.3	2.5	61.0%	12.2%	11.1
16	GULF COAST HCS	520	100.0%	70.0%	20.4	11.1	2.8	40.0%	0.0%	4.7
16	HOUSTON	580	100.0%	100.0%	17.3	7.0	2.7	50.0%	0.0%	9.0
16	JACKSON	586	93.5%	87.1%	16.1	28.8	2.5	29.0%	6.5%	7.0
16	NEW ORLEANS	629	90.9%	81.8%	14.8	8.7	2.2	36.4%	9.1%	7.5
16	OKLAHOMA CITY	635	75.0%	66.7%	16.2	9.9	2.3	41.7%	33.3%	36.0
16	SHREVEPORT	667	78.6%	50.0%	38.5	30.4	2.1	64.3%	14.3%	15.7
17	CENTRAL TEXAS HCS	674	100.0%	100.0%	12.3	12.8	2.8	16.7%	0.0%	2.0
17	NORTH TEXAS HCS	549	84.9%	67.9%	22.4	9.8	2.5	34.0%	9.4%	19.4
17	SOUTH TEXAS VETERANS HCS	671	87.5%	75.0%	15.1	9.0	2.5	62.5%	25.0%	29.0
18	NEW MEXICO HCS	501	90.6%	75.0%	25.4	8.3	2.4	35.9%	6.3%	11.2
18	PHOENIX	644	78.6%	64.3%	28.5	9.1	2.2	71.4%	14.3%	6.0
18	SOUTHERN ARIZONA HCS	678	89.3%	64.3%	28.6	14.4	2.5	50.0%	17.9%	28.4
18	WEST TEXAS HCS	519	85.7%	57.1%	30.7	14.3	2.3	31.0%	2.4%	5.0
19	DENVER	554	97.2%	94.4%	3.4	32.4	2.6	34.7%	11.1%	23.5
19	GRAND JUNCTION	575	100.0%	100.0%	18.0	12.5	2.8	33.3%	0.0%	
19	MONTANA HCS †	436	100.0%	100.0%	5.0	7.0	3.0	0.0%	0.0%	
19	SALT LAKE CITY HCS	660	89.5%	68.4%	19.9	13.6	2.5	63.2%	15.8%	20.6
19	SHERIDAN	666	88.9%	72.2%	17.4	12.8	2.8	38.9%	5.6%	8.3
20	BOISE	531	96.0%	68.0%	32.3	7.7	2.6	52.0%	12.0%	14.5
20	PORTLAND	648	94.7%	89.5%	11.9	14.6	2.8	42.1%	31.6%	18.1
20	PUGET SOUND HCS	663	88.3%	69.3%	21.9	15.8	2.3	53.4%	22.1%	22.5
20	ROSEBURG HCS	653	94.9%	70.5%	24.3	8.2	2.5	37.2%	2.6%	16.0
20	SPOKANE	668	90.9%	63.6%	23.7	7.7	2.8	63.6%	18.2%	32.0
20	WALLA WALLA	687	100.0%	66.7%	38.3	4.7	2.3	33.3%	0.0%	

Table 17. Outpatient treatment received during the first six months after discharge by veterans discharged from VA psychiatric programs with a primary diagnosis of PTSD (October 1, 2002-March 31, 2003). *

VISN	STATION	CODE	Any Psych. Outpatient Visit in 6 mos. After DC	Any Psych. Outpatient Visit in 30 Days After DC	Days to 1st OP Visit in 6 mos. After DC	Number of Visits in 6 mos. Among those w Any Visits	Continuity: Bi-months with 2 Visits	Dually Diagnosed: PTSD and SA Disorder	Any SA Outpatient Visit in 30 days After DC	Number of SA OP Visits in 6 mos. Among those w Any Visits
21	CENTRAL CALIFORNIA HCS	570	77.8%	55.6%	25.1	13.1	2.2	55.6%	11.1%	2.5
21	HONOLULU	459	100.0%	83.3%	12.5	24.7	2.3	16.7%	16.7%	6.0
21	PALO ALTO HCS	640	91.7%	62.5%	24.2	16.3	2.6	54.2%	8.3%	1.3
21	SAN FRANCISCO	662	100.0%	50.0%	29.0	27.5	3.0	50.0%	50.0%	8.0
21	SIERRA NEVADA HCS	654	90.9%	72.7%	22.8	7.7	2.5	36.4%	0.0%	1.0
22	GREATER LOS ANGELES HCS	691	85.0%	65.0%	19.9	27.8	2.2	60.0%	15.0%	16.2
22	LOMA LINDA	605	88.9%	61.1%	32.7	31.3	2.4	27.8%	22.2%	16.7
22	LONG BEACH HCS	600	100.0%	75.0%	24.3	19.5	3.0	25.0%	0.0%	
22	SAN DIEGO HCS	664	85.7%	42.9%	25.2	10.7	2.6	57.1%	0.0%	5.0
22	SOUTHERN NEVADA HCS	593	100.0%	78.6%	21.9	6.4	2.3	42.9%	14.3%	1.3
23	BLACK HILLS HCS	568	100.0%	100.0%	6.8	52.6	2.9	55.6%	55.6%	17.7
23	CENTRAL IOWA HCS	555	100.0%	80.0%	11.3	54.2	2.7	40.0%	0.0%	23.3
23	FARGO	437	100.0%	100.0%	14.3	17.7	2.0	0.0%	33.3%	3.0
23	IOWA CITY	584	100.0%	100.0%	17.0	26.0	3.0	66.7%	33.3%	4.0
23	MINNEAPOLIS	618	100.0%	100.0%	7.6	51.8	2.7	50.0%	10.0%	1.0
23	NEBRASKA-WESTERN IOWA HCS	636	85.7%	85.7%	10.7	62.2	2.6	57.1%	57.1%	24.0
23	SIOUX FALLS	438	100.0%	100.0%	12.0	1.0	2.0	100.0%	0.0%	
23	ST CLOUD	656	100.0%	90.0%	20.2	81.3	2.3	80.0%	30.0%	3.8
ALL VA			90.6%	68.3%	25.4	16.6	2.5	45.5%	12.8%	20.3
AVG			92.4%	70.8%	24.5	19.1	2.5	45.4%	15.7%	18.9
SD			7.7%	18.7%	14.6	16.8	0.3	21.0%	15.0%	18.5
CV			0.08	0.26	0.60	0.88	0.11	0.46	0.96	0.98

* Outlined values are 1 SD in the undesirable direction from the mean of all VAMCs and reflect low outpatient service delivery.

Table 17A. Deviation of continuity of care from that of the median Station over the first six months of treatment in FY 2003, among patients with PTSD (ICD-9 code 309.81), by Station, (adjusted for patient characteristics, distance of residence from VA, diagnosis, etc.).

VISN	Station	Code	Number of O/P Stops	Number of Days with O/P Stops	Continuity: Bi-months with 2 stops	Continuity: Months with any stops	Dropout (6 months with no O/P visit)	Continuity of Care Index	Modified MCI	Number of Providers	Summary Continuity of Outpatient Care (Avg Z)
Median:	VAMC		10.00	12.17	2.61	4.03	0.13	0.53	0.80	2.37	
VA	National Avg.		13.48	10.60	2.59	4.06	0.12	0.58	0.80	2.61	
1	BEDFORD	518	7.87	6.31	0.05	0.32	-0.02	-0.02	0.02	0.99	0.59
1	BOSTON HCS	523	0.77	1.03	0.03	0.18	-0.02	0.07	0.05	-0.28	0.38
1	CONNECTICUT HCS	689	1.66	2.06	0.12	0.35	-0.03	X 0.10	0.07	-0.27	0.69
1	MANCHESTER	608	-1.11	-0.69	0.01	0.05	0.03	0.07	0.04	-0.29	0.05
1	NORTHAMPTON	631	-0.52	0.24	0.01	0.04	0.01	0.00	0.00	-0.01	-0.04
1	PROVIDENCE	650	-0.45	0.31	-0.06	0.02	-0.01	-0.01	-0.03	-0.02	-0.12
1	TOGUS	402	0.67	-0.10	-0.08	X -0.23	X 0.06	-0.02	-0.02	0.26	-0.38
1	WHITE RIVER JCT	405	1.10	1.14	0.09	0.25	-0.02	0.05	0.04	0.16	0.40
2	ALBANY	500	1.67	1.94	0.09	0.40	-0.02	0.08	0.07	-0.26	0.60
2	BATH	514	3.44	1.78	0.10	0.22	-0.08	X -0.09	X -0.03	0.75	0.28
2	CANANDAIGUA	532	5.90	5.00	0.08	0.30	-0.04	X -0.04	X 0.00	0.35	0.50
2	SYRACUSE	670	0.91	0.29	0.15	0.34	-0.05	X 0.01	0.02	0.08	0.44
2	WESTERN NEW YORK HCS	528	6.27	2.22	0.07	0.29	-0.02	0.03	0.05	0.15	0.57
3	BRONX	526	9.06	6.18	0.15	0.57	-0.03	X 0.02	0.04	0.16	0.93
3	HUDSON VALLEY HCS	620	4.24	3.44	0.15	0.48	-0.04	X 0.07	0.06	-0.24	0.82
3	NEW JERSEY HCS	561	3.11	2.61	0.09	0.26	-0.01	0.06	0.05	0.03	0.52
3	NEW YORK HARBOR HCS	630	3.73	3.12	0.13	0.43	-0.02	0.10	0.08	-0.24	0.79
3	NORTHPORT	632	7.72	6.28	0.10	0.19	-0.03	X 0.15	0.10	-0.32	1.09
4	ALTOONA	503	1.08	0.65	0.09	0.22	-0.04	-0.03	0.02	0.05	0.25
4	BUTLER	529	2.50	0.61	0.03	0.04	0.03	-0.07	X -0.04	0.49	-0.18
4	CLARKSBURG	540	-3.54	X -2.63	X -0.09	X -0.43	X -0.02	0.05	0.01	-0.27	-0.28
4	COATESVILLE	542	-1.02	-0.27	0.04	0.32	0.01	0.02	0.01	-0.03	0.09
4	ERIE	562	-3.96	X -2.67	X 0.02	-0.04	0.00	-0.09	X -0.09	X 0.02	-0.55
4	LEBANON	595	-3.42	X -2.52	X 0.01	-0.16	-0.04	X 0.04	0.03	-0.36	-0.01
4	PHILADELPHIA	642	-2.88	X -2.09	X 0.02	0.02	0.01	0.03	0.02	-0.44	-0.09
4	PITTSBURGH HCS	646	-2.60	X -1.64	X 0.04	-0.03	-0.03	0.00	0.01	-0.27	-0.04
4	WILKES BARRE	693	-2.66	X -1.90	X -0.21	X -0.04	X -0.04	X -0.05	X -0.11	-0.31	
4	WILMINGTON	460	-2.39	-1.90	X -0.03	-0.25	X 0.01	0.06	0.01	-0.34	-0.15
5	MARTINSBURG	613	-4.58	X -2.91	X -0.08	X -0.45	X 0.00	0.14	0.06	-0.60	-0.13
5	MARYLAND HCS	512	4.95	3.94	-0.05	0.05	0.04	0.04	0.05	0.16	0.27
5	WASHINGTON	688	1.09	0.19	-0.11	X -0.18	X 0.06	-0.05	X -0.04	X 0.47	-0.47
6	ASHEVILLE	637	-2.02	-1.33	0.07	-0.09	-0.05	X 0.01	-0.01	-0.20	0.03
6	BECKLEY	517	-4.98	X -4.01	X -0.12	X -0.73	X -0.03	0.07	0.01	-0.45	-0.42
6	DURHAM	558	-3.07	X -1.67	X -0.11	X -0.33	X 0.04	0.01	-0.03	X -0.20	-0.52
6	FAYETTEVILLE NC	565	-1.67	-0.85	-0.09	X -0.31	X 0.02	-0.07	X -0.06	X 0.09	-0.57
6	HAMPTON	590	0.21	0.93	0.01	-0.03	0.01	-0.03	-0.01	0.01	-0.09
6	RICHMOND	652	-2.02	-0.81	0.01	-0.02	-0.01	0.10	0.05	-0.37	0.18
6	SALEM	658	-2.97	X -1.97	X 0.00	-0.17	-0.05	X 0.03	0.00	-0.32	-0.05
6	SALISBURY	659	-3.94	X -2.87	X -0.10	X -0.48	X 0.07	0.02	-0.03	X -0.38	-0.67
7	ATLANTA	508	-0.67	-0.81	-0.02	-0.08	0.01	-0.05	X -0.03	X 0.24	-0.31
7	AUGUSTA	509	6.25	2.64	-0.08	X -0.21	X 0.01	-0.10	X -0.06	X 0.68	-0.22
7	BIRMINGHAM	521	-1.09	-0.90	-0.08	X -0.23	X 0.01	-0.14	X -0.12	X 0.77	-0.75
7	CENTRAL ALABAMA VETERANS HCS	619	0.65	0.19	-0.10	X -0.27	X 0.02	-0.15	X -0.13	X 0.57	-0.76
7	CHARLESTON	534	-1.13	-1.46	0.06	0.04	-0.02	0.00	0.00	-0.07	-0.01

Table 17A. Deviation of continuity of care from that of the median Station over the first six months of treatment in FY 2003, among patients with PTSD (ICD-9 code 309.81), by Station, (adjusted for patient characteristics, distance of residence from VA, diagnosis, etc.).

			Number of O/P Stops	Number of Days with O/P Stops	Continuity: Bi-months with 2 stops	Continuity: Months with any stops	Dropout (6 months with no O/P visit)		Continuity of Care Index	Modified MCI	Number of Providers	Summary Continuity of Outpatient Care (Avg Z)			
VISN	Station	Code													
Median: VAMC			10.00	12.17	2.61	4.03	0.13		0.53	0.80	2.37				
VA National Avg.			13.48	10.60	2.59	4.06	0.12		0.58	0.80	2.61				
7	COLUMBIA SC	544	0.77	0.59	0.03	0.07	-0.04	X	-0.10	X	-0.08	X	-0.18		
7	DUBLIN	557	5.02	-0.33	-0.05	-0.38	X	0.02	0.03	0.04	0.19		0.01		
7	TUSCALOOSA	679	-0.36	-1.28	-0.21	X	-0.66	X	-0.29	X	-0.24	X	1.45	-1.57	
8	BAY PINES	516	-1.04	-1.00	-0.05	-0.29	X	-0.02	-0.01	-0.02	0.21		-0.22		
8	MIAMI	546	-1.97	-0.85	-0.02	-0.01	0.02		0.04	0.02	-0.21		-0.10		
8	NO. FLORIDA/SO. GEORGIA VETERANS HS	573	-1.75	-1.12	-0.03	-0.15	X	0.01	-0.01	-0.02	-0.14		-0.27		
8	SAN JUAN	672	-10.90	-7.60	-0.34	-1.09		0.14	-0.17	-0.20	-0.17		-2.27		
8	TAMPA	673	-1.58	-0.76	0.01	-0.14	X	-0.01	0.05	0.03	-0.28		0.04		
8	W PALM BEACH	548	-1.33	-1.16	-0.04	-0.13		0.00	-0.02	-0.03	X	-0.03	-0.28		
9	HUNTINGTON	581	-3.40	X	-2.68	X	-0.16	X	-0.18	X	-0.20	X	0.15	-1.21	
9	LEXINGTON	596	2.45	0.23	0.05	0.14		-0.02	0.10	0.05	-0.21		0.44		
9	LOUISVILLE	603	-3.22	X	-2.61	X	0.01	-0.31	X	-0.03	-0.12	X	0.04	-0.63	
9	MEMPHIS	614	-3.88	X	-2.37	X	-0.03	-0.24	X	0.00	-0.25		-0.31		
9	MIDDLE TENNESSEE HCS	626	-3.42	X	-2.86	X	-0.08	X	-0.09	X	-0.10	X	-0.04	-0.79	
9	MOUNTAIN HOME	621	-2.27	-1.43	-0.03	-0.09		0.02	-0.13	X	-0.12	X	0.15	-0.72	
10	CHILLICOTHE	538	-0.66	-1.23	-0.05	-0.43	X	-0.02	0.00	-0.01	-0.14		-0.23		
10	CINCINNATI	539	2.26	2.05	-0.03	0.14		0.05	-0.01	0.02	0.42		0.00		
10	CLEVELAND	541	2.55	1.08	0.04	0.24		-0.02	-0.08	X	-0.02	X	0.59	0.04	
10	COLUMBUS	757	-2.95	-2.14	X	0.02	-0.10	-0.01	0.04	0.02	-0.33		-0.06		
10	DAYTON	552	4.61	1.68	-0.06	-0.11		0.03	-0.04	X	-0.03	X	0.35	-0.15	
11	ALLEN PARK	553	-1.09		-0.01	-0.03		0.04	0.08	0.04	-0.24		0.03		
11	ANN ARBOR HCS	506	1.44	0.32	0.01	0.06		0.00	-0.09	X	-0.05	X	0.74	-0.19	
11	BATTLE CREEK	515	1.71	0.47	-0.07	-0.05		0.03	-0.18	X	-0.11	X	1.06	-0.68	
11	ILLIANA HCS	550		-0.19	0.01	0.02		-0.01	-0.04		-0.04	X	0.02	-0.14	
11	INDIANAPOLIS	583	3.44	3.11	0.06	0.32		-0.02	-0.02	0.00	0.47		0.34		
11	NORTHERN INDIANA HCS	610	-1.25	-1.00	-0.03	-0.10		0.01	-0.01	-0.02	-0.10		-0.26		
11	SAGINAW	655	-2.50	-1.42	0.00	-0.11		0.04	0.13	0.07	-0.56		0.07		
12	CHICAGO HCS	537	9.15	4.23	0.02	0.19		0.02	-0.01	0.03	0.56		0.44		
12	HINES	578	3.25	1.93	0.07	0.20		0.02	0.03	0.04	-0.06		0.33		
12	IRON MOUNTAIN	585	0.62	-0.63	-0.06	-0.01		0.03	-0.04	-0.01	0.16		-0.27		
12	MADISON	607	3.29	1.29	0.09	0.17	-0.04	X	-0.05	X	-0.02		0.27	0.22	
12	MILWAUKEE	695	3.04	3.13	0.13	0.37	-0.06	X	0.08	0.05	-0.24		0.79		
12	NORTH CHICAGO	556	10.58	3.99	0.06	0.30		0.00	-0.03		0.79		0.48		
12	TOMAH	676	7.39	1.88	-0.02	0.05		0.00	-0.07	X	-0.02		0.66	0.07	
15	COLUMBIA MO	543	-0.56	-1.53	0.01	-0.11		0.00	-0.05	X	-0.04	X	0.33	-0.28	
15	EASTERN KANSAS HCS	677	9.64	5.82	0.06	0.24	-0.03	X	-0.04	X	0.00		0.42	0.59	
15	HEARTLAND-EAST HCS	657	3.18	2.46	0.05	0.23	-0.02		0.05	0.01	0.01		0.41		
15	HEARTLAND-WEST HCS	589	-0.24	0.42	-0.02	0.05	0.03		0.04	0.00	-0.22		-0.04		
15	MARION IL	609	-2.09	-1.79	X	0.08	0.15	-0.04	X	-0.17	X	-0.16	X	0.45	-0.55
15	POPLAR BLUFF	647	-1.44	-1.08		0.11	0.05	-0.05	X	-0.09	X	-0.05	X	0.07	-0.12
15	WICHITA	452	1.44	1.68	0.06	0.22		0.01	0.00	0.01	0.29		0.18		
16	ALEXANDRIA	502	-2.76	-1.46	-0.03	0.02		0.00	-0.09	X	-0.11	X	0.14	-0.54	
16	CENTRAL ARKANSAS VETERANS HCS	598	-0.83	-0.04	-0.05	-0.31	X	0.00	-0.17	X	-0.16	X	0.53	-0.80	
16	FAYETTEVILLE AR	564	-2.51	X	-2.15	X	-0.13	X	-0.09	X	-0.09	X	0.08	-0.73	

Table 17A. Deviation of continuity of care from that of the median Station over the first six months of treatment in FY 2003, among patients with PTSD (ICD-9 code 309.81), by Station, (adjusted for patient characteristics, distance of residence from VA, diagnosis, etc.).

																	Summary			
VISN	Station	Code	Number of O/P Stops		Number of Days with O/P Stops		Continuity: Bi-months with 2 stops		Continuity: Months with any stops		Dropout (6 months with no O/P visit)		Continuity of Care Index		Modified MCI		Number of Providers		Continuity of Outpatient Care (Avg Z)	
Median: VAMC			10.00		12.17		2.61		4.03		0.13		0.53		0.80		2.37			
VA National Avg.			13.48		10.60		2.59		4.06		0.12		0.58		0.80		2.61			
16	GULF COAST HCS	520	-2.66	X	-1.84	X	-0.04	-0.32	X	-0.03	X	-0.08	X	-0.08	X	0.07		-0.52		
16	HOUSTON	580	-0.02		0.58		-0.02	-0.18	X	-0.02		-0.02		-0.04	X	0.16		-0.14		
16	JACKSON	586	-4.47	X	-2.85	X	0.13	0.08		-0.06	X	0.02		-0.01		-0.09		0.06		
16	MUSKOGEE	623	-3.34	X	-2.58	X	-0.01	-0.24	X	0.02		-0.12	X	-0.11	X	-0.02		-0.77		
16	NEW ORLEANS	629	0.00		0.89		0.09	0.34		-0.01		-0.02		-0.01		-0.02		0.15		
16	OKLAHOMA CITY	635	9.57		2.70		-0.11	X	-0.12	0.03		-0.02		-0.01		0.17		0.04		
16	SHREVEPORT	667	-1.61		-0.60		-0.16	X	-0.25	X	0.12	0.06		0.02		-0.30		-0.49		
17	CENTRAL TEXAS VETERANS HCS	674	0.48		1.14		0.00	0.23		0.01		0.00		-0.01		0.00		0.05		
17	NORTH TEXAS HCS	549	-0.50		0.29		-0.01	0.00		0.01		0.00		-0.02		0.02		-0.11		
17	SOUTH TEXAS VETERANS HCS	671	-2.04		-1.22		-0.07	X	-0.31	X	0.00	0.01		-0.01		-0.20		-0.30		
18	AMARILLO	504	-2.50		-2.40	X	-0.19	X	-0.65	X	0.02	-0.07	X	-0.08	X	-0.02		-0.91		
18	EL PASO HCS	756	-0.35		0.88		0.05	0.29		0.00		0.08		0.05		-0.40		0.37		
18	NEW MEXICO HCS	501	-1.41		-0.53		-0.02	-0.09		0.02		0.00		-0.01		0.13		-0.21		
18	NORTHERN ARIZONA HCS	649	-0.10		-1.24		-0.11	X	-0.38	X	0.06	0.13		0.08		-0.44		-0.08		
18	PHOENIX	644	-2.42	X	-1.97	X	-0.02	-0.21	X	0.01		-0.12	X	-0.08	X	0.37		-0.63		
18	SOUTHERN ARIZONA	678	-1.62		0.15		0.09	0.33		0.01		-0.07	X	-0.06	X	0.62		-0.13		
18	WEST TEXAS HCS	519	-2.30		-3.35	X	-0.36	X	-0.94	X	0.02	0.04		0.00		-0.37		-0.84		
19	CHEYENNE	442	-0.93		-0.39		0.04	0.14		0.03		0.04		0.02		-0.11		0.04		
19	DENVER	554	2.37		1.71		0.08	0.40		-0.01		0.00		0.03		0.09		0.38		
19	GRAND JUNCTION	575	-0.24		0.16		0.00	-0.01		0.02		-0.03		-0.02				-0.20		
19	MONTANA HCS	436	2.68		-0.59		-0.16	X	-0.37	X	0.22	0.07		0.03		-0.01		-0.62		
19	SALT LAKE CITY HCS	660	1.72		1.90		0.10	0.27		-0.01		-0.02		0.02		0.17		0.30		
19	SHERIDAN	666	-2.38		-0.56		-0.05	0.06		0.04		0.02		0.02		-0.23		-0.17		
20	ALASKA HCS & RO	463	29.16		26.81		0.83	3.32		-0.10	X	0.07		0.26		1.33		4.38		
20	BOISE	531	-1.47		-0.09		0.12	0.35		-0.01		0.12		0.07		-0.43		0.52		
20	PORTLAND	648	-1.78		-0.44		0.08	0.17		0.00		0.12		0.08		-0.47		0.39		
20	PUGET SOUND HCS	663	-0.37		0.44		0.05	0.22		0.00		0.04		0.03		-0.08		0.23		
20	ROSEBURG HCS	653	-0.75		0.05		0.04	0.08		-0.03		0.08		0.05		-0.28		0.33		
20	SPOKANE	668	-2.02		-0.78		-0.05	-0.14		0.06		0.13		0.09		-0.63		0.04		
20	WALLA WALLA	687	-2.04		-1.81		-0.03	-0.26		-0.02		0.16		0.08		-0.55		0.20		
20	WHITE CITY	692	0.87		1.48		0.05	0.24		0.02		0.08		0.06		-0.10		0.37		
21	CENTRAL CALIFORNIA HCS	570	2.05		-0.04		-0.02	-0.21	X	-0.01		0.08		0.04		-0.40		0.19		
21	HONOLULU	459	32.57		29.25		0.91	3.61		-0.18	X	0.08		0.28		1.52		4.98		
21	MANILA	358	-4.26		-3.57		-0.13	-1.04		0.47		0.32		0.16		-0.86		-1.01		
21	NORTHERN CALIFORNIA HCS	612	-1.77		-1.29		-0.05	-0.17	X	0.07		0.03		0.00		-0.21		-0.34		
21	PALO ALTO HCS	640	0.88		1.69		0.09	0.34		-0.01		-0.01		0.02		0.14		0.30		
21	SAN FRANCISCO	662	5.67		4.26		0.09	0.33		0.00		0.10		0.09		-0.04		0.82		
21	SIERRA NEVADA HCS	654	-2.43		-0.31		-0.05	0.05		0.03		-0.03		-0.06	X	-0.03		-0.39		
22	GREATER LOS ANGELES HCS	691	4.93		4.22		0.07	0.20		-0.01		0.08		0.06		-0.06		0.67		
22	LOMA LINDA	605	0.03		0.25		0.02					-0.04	X	-0.04	X	0.33		-0.16		
22	LONG BEACH HCS	600	1.78		2.09		0.02	0.07		0.00		0.01		0.00		0.22		0.16		
22	SAN DIEGO HCS	664	0.25		0.85		0.01	0.07		0.03		-0.01		0.01		0.23		-0.04		
22	SOUTHERN NEVADA HCS	593	-0.60		0.24		-0.01	0.07		0.04		-0.11	X	-0.08	X	0.44		-0.50		
23	BLACK HILLS HCS	568	11.38		4.65		0.09	0.24		-0.03				0.04		0.62		0.76		

Table 17A. Deviation of continuity of care from that of the median Station over the first six months of treatment in FY 2003, among patients with PTSD (ICD-9 code 309.81), by Station, (adjusted for patient characteristics, distance of residence from VA, diagnosis, etc.).

|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|

X = Significantly different (p<.05) from median VISN in the undesired direction, after adjustment for differences in patient characteristics, distance of residence from VA, diagnosis, etc.

Table 17B. Outpatient continuity of care over the first six months of treatment in FY 2003, among patients with PTSD (ICD-9 code 309.81), by Station.

VISN	CODE	STATION	N	Number of O/P Stops	Number of Days with O/P Stops	Continuity: Bi-months with 2 stops	Continuity: Months with any stops	Dropout (6 months with no O/P visit)	Continuity of Care Index	Modified MCI	Number of Providers
1	518	BEDFORD	445	29.61	21.91	2.70	4.70	0.11	0.50	0.82	4.31
1	523	BOSTON HCS	2048	15.20	12.45	2.64	4.35	0.09	0.67	0.88	2.28
1	689	CONNECTICUT HCS	1093	18.75	14.83	2.74	4.57	0.08	0.63	0.87	2.81
1	608	MANCHESTER	456	8.88	7.99	2.59	4.07	0.14	0.67	0.85	2.03
1	631	NORTHAMPTON	612	11.65	10.08	2.58	4.10	0.13	0.58	0.80	2.46
1	650	PROVIDENCE	813	11.53	10.34	2.57	4.13	0.11	0.58	0.78	2.45
1	402	TOGUS	827	11.47	8.82	2.49	3.75	0.18	0.59	0.79	2.58
1	405	WHITE RIVER JCT	565	10.82	9.46	2.67	4.26	0.10	0.69	0.87	2.30
2	500	ALBANY	966	15.08	12.49	2.69	4.54	0.11	0.67	0.88	2.30
2	514	BATH	388	17.38	12.81	2.68	4.30	0.06	0.47	0.77	3.47
2	532	CANANDAIGUA	444	21.47	16.77	2.68	4.43	0.09	0.53	0.81	3.14
2	670	SYRACUSE	661	13.15	10.20	2.74	4.41	0.07	0.61	0.84	2.52
2	528	WESTERN NEW YORK HCS	891	18.80	12.39	2.66	4.38	0.11	0.63	0.87	2.53
3	526	BRONX	562	23.52	17.62	2.76	4.79	0.11	0.59	0.85	2.89
3	620	HUDSON VALLEY HCS	730	24.55	17.74	2.74	4.61	0.09	0.62	0.86	2.77
3	561	NEW JERSEY HCS	1312	15.16	12.39	2.66	4.25	0.12	0.68	0.86	2.39
3	630	NEW YORK HARBOR HCS	1732	17.09	13.81	2.71	4.48	0.10	0.68	0.88	2.31
3	632	NORTHPORT	764	21.37	17.34	2.72	4.36	0.08	0.73	0.91	2.25
4	503	ALTOONA	197	10.31	8.94	2.66	4.25	0.09	0.58	0.84	2.23
4	529	BUTLER	112	11.52	8.19	2.61	3.96	0.16	0.50	0.75	2.83
4	540	CLARKSBURG	672	6.48	5.84	2.46	3.48	0.10	0.66	0.82	1.97
4	542	COATESVILLE	722	12.50	10.43	2.61	4.32	0.14	0.66	0.85	2.26
4	562	ERIE	210	9.33	7.70	2.64	4.17	0.10	0.47	0.71	2.70
4	595	LEBANON	447	8.90	7.77	2.59	3.91	0.09	0.63	0.83	2.13
4	642	PHILADELPHIA	1320	11.92	9.47	2.65	4.23	0.13	0.58	0.81	2.47
4	646	PITTSBURGH HCS	898	11.52	9.30	2.63	4.06	0.10	0.58	0.81	2.38
4	693	WILKES BARRE	573	8.97	7.56	2.61	3.91	0.07	0.55	0.75	2.35
4	460	WILMINGTON	222	6.67	5.59	2.57	3.54	0.09	0.66	0.81	1.91
5	613	MARTINSBURG	594	10.44	8.59	2.48	3.60	0.12	0.70	0.86	2.16
5	512	MARYLAND HCS	790	25.69	19.53	2.61	4.44	0.17	0.59	0.87	3.24
5	688	WASHINGTON DC	979	21.94	15.22	2.56	4.14	0.17	0.45	0.76	3.92
6	637	ASHEVILLE	795	6.99	6.48	2.62	3.79	0.06	0.63	0.80	1.94
6	517	BECKLEY	409	4.41	4.14	2.42	3.19	0.10	0.70	0.84	1.65
6	558	DURHAM	918	8.75	7.80	2.47	3.66	0.18	0.62	0.79	2.25
6	565	FAYETTEVILLE NC	613	10.26	8.83	2.51	3.78	0.12	0.54	0.76	2.56
6	590	HAMPTON	730	13.42	11.53	2.58	4.01	0.15	0.55	0.79	2.57
6	652	RICHMOND	424	10.54	9.24	2.60	4.01	0.12	0.68	0.85	2.17
6	658	SALEM	457	8.91	7.73	2.59	3.89	0.07	0.59	0.78	2.25
6	659	SALISBURY	862	6.95	6.26	2.45	3.49	0.18	0.57	0.74	2.16

Table 17B. Outpatient continuity of care over the first six months of treatment in FY 2003, among patients with PTSD (ICD-9 code 309.81), by Station.

VISN	CODE	STATION	N	Number of O/P Stops	Number of Days with O/P Stops	Continuity: Bi-months with 2 stops	Continuity: Months with any stops	Dropout (6 months with no O/P visit)	Continuity of Care Index	Modified MCI	Number of Providers
7	508	ATLANTA	1334	15.87	11.77	2.64	4.25	0.13	0.48	0.76	3.25
7	509	AUGUSTA	892	21.18	14.64	2.52	3.94	0.14	0.42	0.71	3.49
7	521	BIRMINGHAM	922	9.72	8.36	2.52	3.87	0.14	0.52	0.73	2.73
7	619	CENTRAL ALABAMA VETERANS HCS	878	11.92	9.76	2.47	3.74	0.15	0.45	0.68	2.92
7	534	CHARLESTON	711	10.34	7.92	2.63	4.03	0.11	0.61	0.81	2.26
7	544	COLUMBIA SC	1695	11.30	9.39	2.58	4.02	0.09	0.50	0.73	2.79
7	557	DUBLIN	657	16.00	8.55	2.48	3.52	0.15	0.63	0.84	2.59
7	679	TUSCALOOSA	872	12.58	8.91	2.37	3.41	0.16	0.29	0.57	4.30
8	516	BAY PINES	1422	10.35	8.92	2.55	3.79	0.10	0.58	0.79	2.66
8	546	MIAMI	857	13.46	11.02	2.59	4.17	0.15	0.62	0.83	2.48
8	573	NO. FL/SO. GA VETERANS HS	1406	10.31	8.37	2.55	3.86	0.12	0.59	0.78	2.24
8	672	SAN JUAN PR	432	7.34	6.72	2.57	3.76	0.07	0.69	0.86	2.03
8	673	TAMPA	1958	9.28	8.26	2.57	3.83	0.11	0.64	0.83	2.11
8	548	W PALM BEACH	740	9.19	7.93	2.55	3.88	0.12	0.59	0.78	2.30
9	581	HUNTINGTON	845	5.03	4.79	2.37	3.33	0.13	0.44	0.61	2.28
9	596	LEXINGTON	517	11.07	7.77	2.59	4.00	0.11	0.72	0.85	1.88
9	603	LOUISVILLE	457	7.49	6.54	2.59	3.73	0.09	0.48	0.70	2.47
9	614	MEMPHIS	479	7.85	7.11	2.54	3.74	0.14	0.60	0.80	2.23
9	626	MIDDLE TENN HCS	999	6.37	5.53	2.46	3.47	0.12	0.51	0.70	2.22
9	621	MOUNTAIN HOME	595	7.50	6.87	2.52	3.84	0.16	0.50	0.70	2.35
10	538	CHILLICOTHE	544	10.19	7.73	2.50	3.49	0.12	0.60	0.80	2.18
10	539	CINCINNATI	818	19.11	14.78	2.56	4.35	0.20	0.52	0.81	3.39
10	541	CLEVELAND	1634	17.95	12.74	2.64	4.37	0.11	0.48	0.78	3.39
10	757	COLUMBUS	410	11.15	8.73	2.60	3.94	0.11	0.60	0.81	2.36
10	552	DAYTON	502	19.54	12.57	2.51	3.93	0.17	0.54	0.77	3.02
11	553	ALLEN PARK	245	15.23	12.17	2.55	3.98	0.17	0.61	0.83	2.82
11	506	ANN ARBOR HCS	331	16.15	11.53	2.65	4.33	0.12	0.57	0.81	3.00
11	515	BATTLE CREEK	822	13.93	9.98	2.51	3.93	0.15	0.39	0.68	3.60
11	550	ILLIANA HCS	386	9.95	8.17	2.54	3.88	0.13	0.57	0.77	2.30
11	583	INDIANAPOLIS	429	18.07	14.78	2.68	4.52	0.11	0.56	0.81	3.19
11	610	NORTHERN INDIANA HCS	375	10.32	8.59	2.55	3.95	0.14	0.57	0.78	2.43
11	655	SAGINAW	226	9.41	8.49	2.55	3.97	0.14	0.68	0.85	2.11
12	537	CHICAGO HCS	852	33.43	21.08	2.71	4.68	0.13	0.50	0.84	4.17
12	578	HINES	419	18.47	13.83	2.69	4.37	0.14	0.60	0.85	2.76
12	585	IRON MOUNTAIN	166	10.55	7.93	2.53	3.99	0.15	0.55	0.79	2.52
12	607	MADISON	352	15.16	10.92	2.67	4.20	0.11	0.55	0.79	2.75
12	695	MILWAUKEE	644	16.81	13.70	2.72	4.43	0.07	0.66	0.85	2.47
12	556	NORTH CHICAGO	384	27.80	16.87	2.65	4.45	0.11	0.51	0.80	3.68
12	676	TOMAH	459	20.24	11.86	2.55	4.03	0.10	0.50	0.77	3.13

Table 17B. Outpatient continuity of care over the first six months of treatment in FY 2003, among patients with PTSD (ICD-9 code 309.81), by Station.

VISN	CODE	STATION	N	Number of O/P Stops	Number of Days with O/P Stops	Continuity: Bi-months with 2 stops	Continuity: Months with any stops	Dropout (6 months with no O/P visit)	Continuity of Care Index	Modified MCI	Number of Providers
15	543	COLUMBIA MO	397	10.87	7.43	2.55	3.80	0.12	0.55	0.77	2.70
15	677	EASTERN KANSAS HCS	853	23.76	16.93	2.66	4.35	0.09	0.53	0.81	3.12
15	657	HEARTLAND-EAST HCS	569	13.57	10.84	2.59	4.12	0.12	0.66	0.81	2.24
15	589	HEARTLAND-WEST	679	11.98	10.15	2.54	4.05	0.16	0.64	0.81	2.22
15	609	MARION IL	597	7.17	6.24	2.63	4.04	0.10	0.44	0.65	2.63
15	647	POPLAR BLUFF	466	8.38	7.25	2.65	3.96	0.09	0.51	0.75	2.38
15	452	WICHITA	338	13.54	11.24	2.61	4.14	0.13	0.60	0.82	2.68
16	502	ALEXANDRIA	258	9.42	8.12	2.55	4.02	0.12	0.51	0.70	2.58
16	598	CENTRAL ARKANSAS HCS	1000	11.62	9.63	2.51	3.64	0.13	0.40	0.62	3.17
16	564	FAYETTEVILLE AR	606	6.51	5.40	2.42	3.39	0.11	0.52	0.72	2.22
16	520	GULF COAST HCS	1537	8.00	7.04	2.53	3.64	0.09	0.52	0.72	2.37
16	580	HOUSTON	1282	12.88	10.92	2.57	3.88	0.10	0.57	0.77	2.65
16	586	JACKSON	440	7.08	6.23	2.70	4.10	0.05	0.61	0.79	2.35
16	623	MUSKOGEE	826	6.77	6.23	2.57	3.76	0.14	0.49	0.70	2.26
16	629	NEW ORLEANS	1523	13.99	11.84	2.65	4.36	0.13	0.55	0.79	2.65
16	635	OKLAHOMA CITY	467	25.90	14.75	2.49	4.01	0.14	0.53	0.79	3.00
16	667	SHREVEPORT	342	12.03	10.04	2.44	3.83	0.24	0.61	0.80	2.46
17	674	CENTRAL TEXAS VETERANS HCS	1216	11.15	10.16	2.57	4.20	0.14	0.60	0.80	2.36
17	549	NORTH TEXAS HCS	1547	13.92	11.31	2.58	4.09	0.13	0.57	0.79	2.65
17	671	SOUTH TEXAS VETERANS HCS	1646	8.05	7.40	2.50	3.64	0.13	0.62	0.79	2.02
18	504	AMARILLO HCS	374	6.96	5.84	2.37	3.26	0.14	0.55	0.73	2.15
18	756	EL PASO HCS	468	10.18	9.72	2.65	4.32	0.12	0.67	0.85	1.95
18	501	NEW MEXICO HCS	1510	11.17	9.49	2.58	3.97	0.14	0.58	0.79	2.69
18	649	NORTHERN ARIZONA VA HCS	387	12.29	8.62	2.50	3.71	0.17	0.71	0.88	2.10
18	644	PHOENIX	1346	9.17	7.50	2.57	3.84	0.14	0.46	0.72	2.84
18	678	SOUTHERN ARIZONA	614	11.63	10.36	2.70	4.41	0.12	0.48	0.73	3.35
18	519	WEST TEXAS HCS	125	9.35	5.30	2.18	2.92	0.18	0.68	0.83	1.90
19	442	CHEYENNE	287	10.50	8.75	2.61	4.18	0.15	0.66	0.84	2.24
19	554	DENVER	1730	15.61	12.12	2.67	4.46	0.12	0.58	0.84	2.65
19	575	GRAND JUNCTION	191	10.68	9.11	2.55	3.97	0.14	0.58	0.79	2.37
19	436	MONTANA HCS	203	13.35	8.54	2.41	3.65	0.36	0.69	0.85	2.29
19	660	SALT LAKE CITY HCS	857	12.24	10.56	2.67	4.24	0.12	0.57	0.82	2.54
19	666	SHERIDAN	135	9.52	8.41	2.49	3.91	0.19	0.55	0.78	2.58
20	463	ALASKA HCS & RO	255	8.39	7.80	2.51	3.78	0.21	0.75	0.89	1.78
20	531	BOISE	446	10.45	9.50	2.69	4.38	0.11	0.73	0.89	1.93
20	648	PORTLAND	1441	11.06	9.56	2.70	4.31	0.10	0.69	0.88	2.15
20	663	PUGET SOUND HCS	2754	14.31	11.65	2.65	4.34	0.12	0.60	0.84	2.70
20	653	ROSEBURG HCS	874	9.87	8.96	2.61	4.04	0.11	0.69	0.87	1.98
20	668	SPOKANE	526	10.29	8.85	2.52	3.90	0.18	0.69	0.88	1.98
20	687	WALLA WALLA	218	8.25	6.80	2.52	3.65	0.11	0.72	0.85	1.89
20	692	WHITE CITY	314	10.73	9.77	2.63	4.19	0.13	0.63	0.84	2.36

Table 17B. Outpatient continuity of care over the first six months of treatment in FY 2003, among patients with PTSD (ICD-9 code 309.81), by Station.

VISN	CODE	STATION	N	Number of O/P Stops	Number of Days with O/P Stops	Continuity: Bi-months with 2 stops	Continuity: Months with any stops	Dropout (6 months with no O/P visit)	Continuity of Care Index	Modified MCI	Number of Providers
21	570	CENTRAL CALIFORNIA HCS	427	16.16	10.53	2.55	3.80	0.11	0.68	0.86	2.14
21	459	HONOLULU	720	11.17	9.57	2.56	3.99	0.16	0.77	0.91	1.89
21	358	MANILA	8	3.00	3.00	2.50	2.75	0.63	1.00	1.00	1.00
21	612	NORTHERN CALIFORNIA HCS	1356	10.89	8.78	2.54	3.85	0.19	0.62	0.81	2.24
21	640	PALO ALTO HCS	1528	13.78	12.03	2.68	4.39	0.12	0.57	0.82	2.70
21	662	SAN FRANCISCO	968	22.57	16.50	2.67	4.43	0.12	0.66	0.89	2.88
21	654	SIERRA NEVADA HCS	301	12.46	11.05	2.60	4.32	0.16	0.51	0.73	2.95
22	691	GREATER LOS ANGELES HCS	2018	18.93	15.29	2.67	4.30	0.11	0.64	0.86	2.68
22	605	LOMA LINDA	953	11.62	9.77	2.61	4.03	0.13	0.56	0.77	2.73
22	600	LONG BEACH HCS	458	18.29	14.20	2.59	4.17	0.14	0.56	0.80	3.05
22	664	SAN DIEGO HCS	982	10.95	9.87	2.57	4.07	0.15	0.60	0.82	2.59
22	593	SOUTHERN NEVADA HCS	711	11.62	10.22	2.59	4.12	0.17	0.48	0.73	2.84
23	568	BLACK HILLS HCS	435	29.60	16.94	2.67	4.33	0.13	0.53	0.84	3.80
23	555	CENTRAL IOWA HCS	301	29.89	16.96	2.51	3.98	0.15	0.50	0.79	3.85
23	437	FARGO	114	8.54	6.46	2.46	3.36	0.20	0.55	0.74	2.42
23	584	IOWA CITY	327	13.43	8.98	2.61	4.00	0.11	0.56	0.79	2.61
23	618	MINNEAPOLIS	939	15.47	9.63	2.60	4.06	0.09	0.53	0.78	2.95
23	636	NEBRASKA- WESTERN IOWA HCS	583	16.29	10.97	2.63	4.13	0.12	0.64	0.86	2.37
23	438	SIOUX FALLS	220	9.51	7.85	2.62	4.10	0.08	0.74	0.88	1.86
23	656	ST CLOUD	746	26.90	15.19	2.62	4.24	0.09	0.33	0.69	4.81
All VA			102,658	13.48	10.60	2.59	4.06	0.12	0.57	0.80	2.61
Avg.			739	13.19	10.23	2.58	4.02	0.13	0.59	0.80	2.58
S.D.			476	5.71	3.46	0.09	0.35	0.06	0.09	0.06	0.56
C.V			0.64	0.43	0.34	0.03	0.09	0.44	0.16	0.08	0.22

Table 18. Overall PTSD Performance Score for FY 2003, by VISN. †

VISN	Inpatient Summary Score Average Z: Weighted# (Table 14)	Outpatient Summary Score Average Z: Weighted (Table 16)	Summary Continuity of Outpatient Care Average Z (Table 16A)	Total PTSD Summary Score Average Z: (+=desired)	Rank Order On Total PTSD Summary Score
1	-0.13	-0.31	0.63	0.07	10
2	-0.18	-0.15	1.30	0.32	6
3	0.47	0.19	1.85	0.84	2
4	0.07	-0.14	-0.17	-0.08	12
5	-0.12	0.69	-0.38	0.06	11
6	-0.50	-1.09	-0.78	-0.79	20
7	-0.13	-0.19	-0.91	-0.41	16
8	0.20	0.35	-0.34	0.07	9
9	-0.44	-0.99	-1.34	-0.92	21
10	0.34	0.59	-0.08	0.28	8
11	-0.23	-0.56	-0.35	-0.38	15
12	-0.46	0.83	0.88	0.42	4
15	-1.41	0.20	0.22	-0.33	14
16	-0.19	-0.27	-0.76	-0.41	17
17	-0.79	-0.40	-0.38	-0.52	18
17	-0.15	-0.89	-0.87	-0.64	19
19	0.61	1.09	0.27	0.66	3
20	0.46	0.00	0.47	0.31	7
21	1.14	-0.38	0.32	0.36	5
22	-0.41	-0.35	0.37	-0.13	13
23	1.83	1.78	0.09	1.23	1
AVG	0.0	0.0	0.0	0.00	
SD	0.7	0.7	0.8	0.55	

Sign is reversed so that high scores reflect difference in the desired direction -- low inpatient utilization.

† Rankings only comparable to FY 1998 report.

Table 19. Residence in VISN in which VA treatment was received among veterans discharged from VA inpatient programs from October 1, 2002 to March 31, 2003, by PTSD diagnosis and program type, by VISN†.

VISN	General Psych. Program: Primary Diagnosis PTSD		General Psych. Program: Non-PTSD Diagnosis		Substance Abuse Program: All Diagnoses	
	<i>Number of Unique Patients w PTSD Dx.</i>	<i>Reside in VISN in which treatment was delivered</i>	<i>Number of Unique Patients w. no PTSD Dx.</i>	<i>Reside in VISN in which treatment was delivered</i>	<i>Number of Unique Patients Any Dx.</i>	<i>Reside in VISN in which treatment was delivered</i>
1	318	97.2%	1,421	98.5%	391	98.7%
2	50	98.0%	703	96.7%		
3	77	96.1%	1,315	95.6%		
4	98	94.9%	1,299	96.6%	9	93.3%
5	53	84.9%	1,227	91.6%	158	91.8%
6	402	73.6%	1,955	97.2%	58	98.3%
7	231	96.5%	1,634	96.6%	122	99.2%
8	120	98.3%	2,092	97.6%		
9	111	93.7%	1,827	91.4%	177	97.7%
10	53	81.1%	1,239	94.6%	114	93.9%
11	57	91.2%	1,360	97.1%	253	99.6%
12	96	93.8%	1,357	96.9%	215	99.1%
15	151	78.8%	1,632	96.0%		
16	133	94.7%	2,733	95.1%	71	98.6%
17	125	94.4%	1,471	94.7%		
18	84	96.4%	920	95.8%	17	95.3%
19	116	87.9%	815	95.1%		
20	299	89.3%	1,113	96.5%	169	98.2%
21	52	98.1%	1,034	96.2%	193	97.4%
22	63	92.1%	1,393	96.6%	131	95.4%
23	58	94.8%	1,187	97.5%		
All VA	2,747	90.0%	29,727	95.9%	2,249	97.3%
Average	131	91.7%	1,416	95.9%	148	96.9%
S.D.	99	6.8%	461	1.8%	100	2.5%
C.V.	0.76	0.07	0.33	0.02	0.68	0.03

† Does not include PRRP and domiciliary care.

Table 20. Residence in VISN in which VA treatment was received among veterans discharged from VA inpatient programs from October 1, 2002 to March 31, 2003, by PTSD diagnosis and program type, by VAMC†.

VISN	CODE	FACILITY	General Psych. Program: Primary Diagnosis PTSD		General Psych. Program: Non-PTSD Diagnosis		Substance Abuse Program: All Diagnoses	
			Number of Unique Patients w PTSD Dx.	Reside in VISN in which treatment was delivered	Number of Unique Patients w. no PTSD Dx.	Reside in VISN in which treatment was delivered	Number of Unique Patients Any Dx.	Reside in VISN in which treatment was delivered
1	518	BEDFORD	8	100.0%	376	98.9%		
1	523	BOSTON HCS	43	100.0%	395	98.2%	344	98.5%
1	689	CONNECTICUT HCS	17	100.0%	174	98.3%	14	100.0%
1	631	NORTHAMPTON	198	96.0%	174	98.9%		
1	650	PROVIDENCE	16	100.0%	183	100.0%		
1	402	TOGUS	1	100.0%	22	100.0%	33	100.0%
1	405	WHITE RIVER JCT	35	97.1%	97	94.8%		
2	500	ALBANY	8	100.0%	154	96.1%		
2	532	CANANDAIGUA	3	100.0%	111	94.6%		
2	670	SYRACUSE	14	92.9%	148	98.0%		
2	528	WESTERN NEW YORK HCS	25	100.0%	290	97.2%		
3	526	BRONX	18	100.0%	163	98.8%		
3	620	HUDSON VALLEY HCS	20	90.0%	163	90.2%		
3	561	NEW JERSEY HCS	22	95.5%	361	93.9%		
3	630	NEW YORK HARBOR HCS	14	100.0%	502	96.4%		
3	632	NORTHPORT	3	100.0%	126	100.0%		
4	540	CLARKSBURG	9	100.0%	69	92.8%	1	100.0%
4	542	COATESVILLE	22	95.5%	169	97.6%		
4	595	LEBANON	10	100.0%	164	97.0%		
4	642	PHILADELPHIA	15	86.7%	352	97.2%		
4	646	PITTSBURGH HCS	33	97.0%	448	96.2%		
4	693	WILKES BARRE	9	88.9%	97	96.9%	89	93.3%
5	613	MARTINSBURG	27	74.1%	196	88.3%	158	91.8%
5	512	MARYLAND HCS	15	93.3%	697	92.4%		
5	688	WASHINGTON DC	11	100.0%	334	91.9%		
6	637	ASHEVILLE	44	88.6%	90	94.4%		
6	558	DURHAM	41	95.1%	320	97.8%		
6	565	FAYETTEVILLE NC	25	92.0%	239	97.5%		
6	590	HAMPTON	82	98.8%	484	98.1%		
6	652	RICHMOND	1	100.0%	218	97.7%	58	98.3%
6	658	SALEM	118	56.8%	254	95.7%		
6	659	SALISBURY	91	50.5%	350	96.6%		
7	508	ATLANTA	47	100.0%	326	96.0%	122	99.2%
7	509	AUGUSTA	78	94.9%	435	96.8%		
7	619	CENTRAL ALABAMA VETERANS HCS	47	97.9%	325	96.9%		
7	534	CHARLESTON	13	100.0%	200	98.5%		
7	544	COLUMBIA SC	32	90.6%	152	96.1%		
7	679	TUSCALOOSA	14	100.0%	196	95.4%		
8	516	BAY PINES	19	100.0%	338	99.4%		
8	546	MIAMI	8	100.0%	271	95.9%		
8	573	NO. FL/SO. GA VETERANS HS	29	96.6%	398	95.5%		
8	672	SAN JUAN PR	13	100.0%	320	99.7%		
8	673	TAMPA	21	100.0%	407	97.8%		
8	548	W PALM BEACH	30	96.7%	358	97.5%		
9	596	LEXINGTON	12	100.0%	232	97.0%		
9	603	LOUISVILLE	9	88.9%	291	95.2%		
9	614	MEMPHIS	26	96.2%	280	93.2%	174	97.7%
9	626	MIDDLE TENN HCS	34	91.2%	718	88.3%	3	100.0%
9	621	MOUNTAIN HOME	30	93.3%	306	88.9%		
10	538	CHILLICOTHE	17	88.2%	326	93.6%		
10	539	CINCINNATI	14	85.7%	197	95.9%	29	89.7%
10	541	CLEVELAND	9	77.8%	431	95.6%	77	96.1%
10	552	DAYTON	13	69.2%	285	93.3%	8	87.5%

Table 20. Residence in VISN in which VA treatment was received among veterans discharged from VA inpatient programs from October 1, 2002 to March 31, 2003, by PTSD diagnosis and program type, by VAMC†.

VISN	CODE	FACILITY	General Psych. Program: Primary Diagnosis PTSD		General Psych. Program: Non-PTSD Diagnosis		Substance Abuse Program: All Diagnoses	
			Number of Unique Patients w PTSD Dx.	Reside in VISN in which treatment was delivered	Number of Unique Patients w. no PTSD Dx.	Reside in VISN in which treatment was delivered	Number of Unique Patients Any Dx.	Reside in VISN in which treatment was delivered
11	553	ALLEN PARK	9	88.9%	267	98.9%	253	99.6%
11	506	ANN ARBOR HCS	9	88.9%	211	98.6%		
11	515	BATTLE CREEK	23	91.3%	438	98.2%		
11	550	ILLIANA HCS	4	100.0%	191	92.7%		
11	583	INDIANAPOLIS	6	100.0%	149	94.0%		
11	610	NORTHERN INDIANA HCS	6	83.3%	104	97.1%		
12	537	CHICAGO HCS	43	97.7%	428	97.4%	61	96.7%
12	578	HINES	11	100.0%	323	97.8%		
12	607	MADISON	8	100.0%	142	98.6%		
12	695	MILWAUKEE	17	100.0%	216	99.1%		
12	556	NORTH CHICAGO	12	75.0%	148	94.6%		
12	676	TOMAH	5	60.0%	100	88.0%		
15	543	COLUMBIA MO	10	90.0%	140	92.9%	71	98.6%
15	677	EASTERN KANSAS HCS	111	73.0%	504	95.0%		
15	657	HEARTLAND-EAST HCS	22	95.5%	700	97.0%		
15	589	HEARTLAND-WEST	8	100.0%	288	96.5%		
16	502	ALEXANDRIA	2	100.0%	234	98.7%		
16	598	CENTRAL ARKANSAS HCS	41	97.6%	383	92.7%		
16	564	FAYETTEVILLE AR	10	100.0%	189	95.8%	71	98.6%
16	520	GULF COAST HCS	6	83.3%	464	92.2%		
16	580	HOUSTON	31	96.8%	395	96.7%		
16	586	JACKSON	11	81.8%	240	91.7%		
16	629	NEW ORLEANS	12	91.7%	273	97.4%		
16	635	OKLAHOMA CITY	14	100.0%	293	98.0%		
16	667	SHREVEPORT	6	83.3%	262	94.7%		
17	674	CENTRAL TEXAS VETERANS HCS	53	86.8%	344	93.3%	107	95.3%
17	549	NORTH TEXAS HCS	8	100.0%	496	94.2%		
17	671	SOUTH TEXAS VETERANS HCS	64	100.0%	631	95.9%		
18	501	NEW MEXICO HCS	14	100.0%	224	98.2%		
18	644	PHOENIX	28	96.4%	546	95.8%		
18	678	SOUTHERN ARIZONA	42	95.2%	150	92.0%		
19	554	DENVER	72	83.3%	250	95.2%	135	97.8%
19	575	GRAND JUNCTION	6	100.0%	98	95.9%		
19	436	MONTANA HCS	1	100.0%	38	94.7%		
19	660	SALT LAKE CITY HCS	19	94.7%	277	96.4%		
19	666	SHERIDAN	18	94.4%	152	92.1%		
20	531	BOISE	25	76.0%	110	96.4%		
20	648	PORTLAND	19	100.0%	260	97.7%	34	100.0%
20	663	PUGET SOUND HCS	163	98.8%	416	97.6%		
20	653	ROSEBURG HCS	78	69.2%	223	91.9%		
20	668	SPOKANE	11	100.0%	75	98.7%		
20	687	WALLA WALLA	3	100.0%	29	100.0%		
21	570	CENTRAL CALIFORNIA HCS	9	100.0%	133	92.5%		
21	459	HONOLULU	6	100.0%	100	97.0%	149	97.3%
21	640	PALO ALTO HCS	24	100.0%	485	96.5%		
21	662	SAN FRANCISCO	2	100.0%	127	96.9%		
21	654	SIERRA NEVADA HCS	11	90.9%	189	97.4%		
22	691	GREATER LOS ANGELES HCS	20	85.0%	532	96.4%		
22	605	LOMA LINDA	18	100.0%	281	97.5%	131	95.4%
22	600	LONG BEACH HCS	4	100.0%	178	99.4%		
22	664	SAN DIEGO HCS	7	100.0%	242	96.7%		
22	593	SOUTHERN NEVADA HCS	14	85.7%	160	92.5%		

Table 20. Residence in VISN in which VA treatment was received among veterans discharged from VA inpatient programs from October 1, 2002 to March 31, 2003, by PTSD diagnosis and program type, by VAMC†.

VISN	CODE	FACILITY	General Psych. Program: Primary Diagnosis PTSD		General Psych. Program: Non-PTSD Diagnosis		Substance Abuse Program: All Diagnoses	
			<i>Number of Unique Patients w PTSD Dx.</i>	<i>Reside in VISN in which treatment was delivered</i>	<i>Number of Unique Patients w. no PTSD Dx.</i>	<i>Reside in VISN in which treatment was delivered</i>	<i>Number of Unique Patients Any Dx.</i>	<i>Reside in VISN in which treatment was delivered</i>
23	568	BLACK HILLS HCS	9	88.9%	88	93.2%		
23	555	CENTRAL IOWA HCS	15	93.3%	153	99.3%		
23	437	FARGO	3	100.0%	97	96.9%		
23	584	IOWA CITY	3	100.0%	111	93.7%		
23	618	MINNEAPOLIS	10	100.0%	247	97.6%		
23	636	NEBRASKA- WESTERN IOWA HCS	7	85.7%	164	98.8%		
23	438	SIOUX FALLS	1	100.0%	92	100.0%		
23	656	ST CLOUD	10	100.0%	235	97.9%		
ALL VA			2747	90.0%	29727	95.9%	2249	97.3%
AVG			24	93.4%	263	96.0%	98	97.0%
SD			31	9.8%	148	2.7%	84	3.5%
CV			1.26	0.10	0.56	0.03	0.86	0.04

† Does not include PRRP and domiciliary care.

PART II: TREATMENT OF VETERANS BY SPECIALIZED PTSD OUTPATIENT TEAMS

Part II presents data on the clinical operation of the PTSD Clinical Team (PCT), Substance Use PTSD Team (SUPT) and Women's Stress Disorder Treatment Team (WSDTT) programs for FY 2003. The data presented in this chapter are derived from PTSD Status Forms (PSFs) that are completed by staff members for each veteran newly admitted to treatment by their specialized programs within FY 2003. A "newly admitted" veteran is defined as one who has not been in treatment with the particular specialized program in the past 12 months before this admission. This means that only one PSF per veteran per program within any 12-month period is kept in the dataset. "Treatment" is defined as more than one visit to the program for this episode of therapy. ¹

Throughout the presentation, variables assessing key aspects of the programs' specialized mission are designated as critical monitors. Other variables that are descriptive of the veteran population being served are presented to provide a more extensive picture. The data are evaluated at both the program and the VISN level. Programs that deviate by more than one standard deviation from the average for all programs are identified as outliers. In addition to comparing each individual program to the other programs, each VISN is compared to other VISNs.

Comprehensive Evaluation and Monitoring Procedures

VA's Northeast Program Evaluation Center (NEPEC), the Evaluation Division of the National Center for PTSD, monitors and evaluates the administrative and clinical operation of all of the specialized programs for PTSD. The patient-specific data presented in this section of the report were collected by clinicians whose primary responsibility was delivering clinical care rather than collecting data. Although some variation in administration and reporting is to be expected, several procedures were instituted to minimize this variation:

- a. *Manuals.* Detailed manuals were written describing the correct manner of administration of the questionnaire, the conventions for coding responses to ambiguous questions, and the recommended solutions to other common problems in data collection.
- b. *Individualized Training.* Each program designates two staff persons to serve as the local director and data manager of the monitoring protocol. Individualized training is given over the telephone to these staff persons for each new program that is added to the national network and to each new staff member of an existing program who has been designated as director or data manager.

¹ In Part III, data are presented for "New vets treated" as determined from the Stop Code data. "New vets treated" in Part III is defined as those veterans who have more than one visit recorded in the Austin Outpatient File within FY 2003 but no visits during the previous fiscal year. It should be noted that the definition of "new vets treated" in Part III is more stringent than the definition of "newly admitted" veterans in Part II. The definition of "treated" remains the same, that is, seen more than once.

c. *Data Reporting and Management.* Data managers enter the data that have been collected by clinicians electronically into the National Mental Health Data Base located at the Pittsburgh VA Medical Center at Highland Drive. Each month, NEPEC downloads these data from Pittsburgh and appends them to a master file. The new data are reviewed at NEPEC for errors and inconsistencies. When problems are identified, they are corrected through telephone calls or letters to the programs.

d. *Contact with the programs.* Feedback on the progress of data collection and discussion of systematic changes in the conduct of the evaluation take place during monthly conference calls in which all programs are invited to participate. Tables summarizing monthly data by program are distributed by mail and displayed on the VA Intranet.

Rationale of the Monitoring Protocol

Specialized treatment of PTSD is a relatively new clinical activity, requiring considerable freedom for clinical innovation. Evaluation efforts are based on the assumption that rigid regulations or performance standards are not appropriate for the programs in their current stages of development, and that premature standardization might stifle the creative evolution of new interventions or combinations of existing interventions that would prove to be particularly efficacious. At the same time, it is important to evaluate the programs as completely and objectively as possible.

Although absolute practice standards have not been established for the treatment of PTSD, statistical norms can be derived from the distribution of data across the individual programs. The distinction between statistical norms and formal practice standards is an important one. Practice standards are established by a consensus of professionals and codify how health care should be conducted. Statistical norms, in contrast, reflect how health care is practiced on average, without specifying exactly what is and what is not acceptable practice. Practice variation can be measured and statistical outliers can be identified. The identification of statistical outliers must not be confused with the identification of practice standard violations. Statistical outliers are extremes on a continuum and, as such, deserve attention. However, without further exploration of specific circumstances, no conclusions can be drawn regarding their exact meaning.

Monitoring Instrument

A three-page PTSD Status Form (PSF) is used to monitor the most salient characteristics of the veterans being treated by the outpatient specialized PTSD programs. The PSF includes the principal demographic, military, social adjustment, and diagnostic information from the War Stress Interview - Part 1 (WSI-1). The WSI-1 was one of the primary instruments that were used in earlier, more intensive studies of the implementation and outcomes of the specialized

outpatient PTSD programs. The PSF was revised a few years ago by the addition of two questions of special interest to VA leadership: evaluation of PTSD due to military sexual trauma and evaluation of PTSD due to military noncombat nonsexual trauma.

Critical Monitors for Outpatient Programs

Through the selection of critical monitors, we have sought to highlight those features of the operation of the programs that are most relevant to their specialized mission. Six of the evaluation measures were selected as critical monitors for outpatient programs. The first five are characteristics of the population being served: war zone service, clinical diagnosis of PTSD, diagnosis of substance abuse, prior psychiatric treatment of any type, and prior specialized PTSD treatment in particular. The other critical monitor concerns the performance of program staff: validation of war zone service by the DD214. The directionality of these monitors that is in accordance with the programs' mission is **high** percentages of war zone service, diagnoses of PTSD and substance abuse, and the validation of war zone service by the DD214. **Low** percentages of veterans who had prior specialized PTSD treatment or psychiatric treatment of any type are in accordance with the programs' defined mission.

It must, once again, be emphasized that these monitors should not necessarily be considered, by themselves, to be indicators of the appropriateness of the administrative or clinical operation of particular programs. They can properly be used only to identify statistical outliers, the importance of which must be determined by follow-up discussions with the programs. Since any modification of administrative and/or clinical practices must take place at the level of the individual program, it is essential that an evaluation examine the data at both this level as well as at the VISN level.

Comparison of VISNs and Individual Programs on Critical Monitors

Outlier performance is indicated by any value that is 1 standard deviation from the mean of all VISNs or of all specialized programs, and is marked by a boxed cell. Outlier status for the VISNs as a whole is presented in Tables 2-1 and 2-3. The particular individual programs contributing most prominently to the VISNs' outlier status are identified in Tables 2-2 and 2-4. Table 2-7 summarizes the number of critical monitors that are outliers for each VISN. The WSDTTs were not included in the calculation of outliers on the critical monitor War Zone Service, because until recently women did not typically serve in war zones.

VISNs 1, 20 and 23 are outliers in veterans' **war zone service**. The particular programs contributing most to the outlier status in these VISNs are the Boston HCS (Boston) PCT, the Connecticut HCS (West Haven) PCT and the White River Junction PCT in VISN 1; the Boise PCT and the Portland PCT within VISN 20, and the Black Hills HCS (Fort Meade) SUPT within VISN 23. Other individual programs that are outliers are the Canandaigua PCT within VISN 2; the Hudson Valley HCS (Castle Point) PCT within VISN 3; the Philadelphia PCT within VISN4; the Maryland HCS PCTs at Baltimore and Perry Point within VISN 5; the No.FL/So. GA Veterans HCS (Gainesville) PCT within VISN 8; the Cincinnati PCT within VISN 10; the Northern Indiana HCS (Marion) PCT within VISN 11; the New Mexico HCS (Albuquerque) PCT in VISN 18; and the Cheyenne PCT in VISN 19. The percentage of veterans who have

served in a war zone is lower in these VISNs and individual programs than in other VISNs and programs.

VISNs 1, 5, 8 and 23 are outliers in ***PTSD clinical diagnosis***. The particular programs contributing most to the outlier status in these VISNs are the Boston HCS (Boston) WSDTT, and the Connecticut HCS (West Haven) PCT and SUPT within VISN 1; both Maryland HCS PCTs at Baltimore and Perry Point within VISN 5; the No. FL/So. GA Veterans HCS (Gainesville) PCT within VISN 8; and the Black Hills HCS (Fort Meade) SUPT and the Minneapolis PCT within VISN 23. Individual programs which are outliers in other VISNs are the Pittsburgh HCS (Highland Drive) SUPT within VISN 4; the Cincinnati PCT within VISN 10; the Ann Arbor PCT within VISN 11; the Madison WSDTT in VISN 12; the Wichita PCT within VISN 15; the Oklahoma City PCT within VISN 16; the Central TX Veterans HCS (Waco) PCT within VISN 17; the El Paso Veterans HCS PCT and the Southern Arizona HCS (Tucson) PCT in VISN 18; the Boise and the Portland PCTs within VISN 20; and the Loma Linda WSDTT within VISN 22. The percentage of veterans who have a clinical diagnosis of PTSD is lower in these VISNs and individual programs than in others.

VISNs 6, and 15 are outliers in ***substance abuse diagnosis***. Within these VISNs the particular programs contributing most to the outlier status are the Fayetteville NC PCT within VISN 6 and the Poplar Bluff and the St. Louis PCTs within VISN 15. Other individual programs which are outliers are the Boston HCS (Brockton) SUPT and the Manchester PCT within VISN 1; the Pittsburgh HCS (Highland Drive) PCT within VISN 4; the San Juan PCT within VISN 8; the Huntington PCT and the Lexington PCT within VISN 9; the Chillicothe and the Columbus PCTs in VISN 10; the Southern Arizona HCS (Tucson) PCT within VISN 18; the Southern Colorado HCS (Pueblo) PCT within VISN 19; the Northern California HCS PCT in VISN 21; and the and the Loma Linda WSDTT and the Southern Nevada HCS (Las Vegas) PCT within VISN 22. The percentage of veterans who are diagnosed with a substance abuse disorder is lower in these VISNs and individual programs than in others.

VISNs 3 and 18 are outliers in ***validation of war zone service by DD214***. Within these VISNs the particular programs contributing most to the outlier status are the Hudson Valley HCS (Castle Point) PCT, the New Jersey HCS (East Orange) PCT and the New York Harbor HCS (Brooklyn) PCT in VISN 3; and the El Paso Veterans HCS PCT and the Southern Arizona HCS (Tucson) PCT within VISN 18.

In addition, other programs which are outliers are the Connecticut HCS (West Haven) PCT and SUPT and the Providence PCT within VISN 1; the Pittsburgh HCS (Highland Drive) PCT in VISN 4; the Maryland HCS (Baltimore) PCT in VISN 5; the Augusta and Charleston PCTs within VISN 7; the San Juan PCT within VISN 8; the Madison WSDTT in VISN 12; the St. Louis PCT within VISN 15; the Central Texas Veterans HCS (Austin) and (Temple) PCTs within VISN 17; the Puget Sound HCS (Seattle) PCT within VISN 20; the San Diego HCS PCT in VISN 22; and the Sioux Falls PCT within VISN 23. The percentage of veterans admitted to treatment without having their war zone service verified by reference to the DD214 or similar military records is lower in these VISNs and individual programs than it is in others.

VISNs 2 and 19 are outliers in admitting higher percentages of veterans who have had **prior psychiatric treatment**. Within these VISNs the particular programs contributing most to the outlier status are the Canandaigua PCT and the Western NY HCS (Batavia) in VISN 2, and the Cheyenne PCT and the Grand Junction PCT in VISN 19.

Individual programs which are outliers in other VISNs include the Boston HCS (Boston) WSDTT and the Boston HCS (Brockton) SUPT within VISN 1; the Coatesville PCT and the Pittsburgh HCS (Highland Drive) SUPT in VISN 4; the Maryland HCS (Perry Point) PCT in VISN 5; the Fayetteville NC PCT in VISN 6; the Dublin PCT in VISN 7; the Madison WSDTT in VISN 12; the New Orleans WSDTT within VISN 16; the North Texas HCS (Dallas) in VISN 17; and the Central Iowa HCS (Knoxville) PCT and the Sioux Falls PCT within VISN 23. The percentage of veterans who have had prior psychiatric treatment was higher in these VISNs and individual programs than in others.

VISNs 2, 4 and 19 are outliers in admitting veterans who have had **prior specialized PTSD treatment**. The particular programs contributing most to the outlier status of these VISNs are the Western NY HCS (Batavia) PCT in VISN 2; the Coatesville PCT and the Pittsburgh HCS (Highland Drive) SUPT within VISN 4; and the Cheyenne PCT, the Grand Junction PCT and the Southern Colorado HCS (Pueblo) PCT within VISN 19. Outlier programs within other VISNs include the White River Junction PCT within VISN 1; the Maryland HCS (Perry Point) PCT in VISN 5; the Dublin PCT within VISN 7; the Bay Pines PCT in VISN 8; the Huntington PCT in VISN 9; the Brecksville WSDTT and the Dayton PCT within VISN 10; the Chicago HCS (West Side) PCT within VISN 12; the Central Arkansas Veterans HCS (No. Little Rock) PCT and the New Orleans WSDTT within VISN 16; the Phoenix PCT in VISN 18; the San Francisco SUPT within VISN 21; the San Diego PCT in VISN 22; and the Central Iowa HCS (Knoxville) PCT within VISN 23. The percentage of veterans who have had prior specialized PTSD treatment was higher in these VISNs and individual programs than in others.

The number of critical monitors that were outliers is tabulated for each VISN in Table 2-7. Adjustment for the different number of programs across the VISNs was made by calculating the mean number of outliers for each VISN. VISNs that are outliers for the outliers themselves are VISN 1, 4, 5, 18, and VISN 19. The mean number of outliers was higher in these VISNs than in others.

Description of Veterans' Other Characteristics

Several other veterans' characteristics are presented for descriptive purposes in Tables 2-5, 2-8, 2-10, 2-12, 2-14, 2-16, 2-18 and 2-20 for the VISNs and Tables 2-6, 2-9, 2-11, 2-13, 2-15, 2-17, 2-19 and 2-21 for individual programs. These characteristics have not been designated as critical monitors because they have not been considered critical for evaluating the operation of the programs with regard to carrying out the mission of specialized PTSD programs. Further, outliers have not been identified because it is often not possible to define one tail of the distribution as more or less desirable than the other tail. A description of the population being served by the programs can be summarized at the VISN level as follows.

Veterans averaged 55.1 years of age (sd=1.3). Eighty-nine percent (sd=3%) had a high school education or more (sd=3%), and 68% (sd=5%) were not working currently. Twenty-one percent (sd=8%) reported difficulty controlling violent behavior. Ninety-four percent (sd=4%) were male; and currently 56% (sd=7%) were married, 33% (sd=5%) were separated or divorced, and 8% (sd=3%) had never been married. Sixty-seven percent (sd=17%) were Caucasian, 23% (sd=17%) African-American, 7% (sd=9%) Hispanic and 3% (sd=3%) were of other racial/ethnic background.

Four percent (sd=2%) served during the World War II era, 4% (sd=1%) during the Korean War era, 75% (sd=5%) during the Vietnam War era, and 11% (sd=4%) during the Persian Gulf War era. Eighty-two percent (sd=6%) were exposed to enemy/friendly fire; 7% (sd=2%) participated in atrocities; and 2% (sd=1%) were prisoners of war. Sixty percent (sd=6%) of the veterans were service connected.

At the time of admission to the programs, 65% (sd=12%) of the veterans were already prescribed psychotropic medications; 45% (sd=11%) were diagnosed with an Axis I nonpsychotic disorder other than PTSD; 7% (sd=2%) were diagnosed with an Axis I psychotic disorder; and 9% (sd=6%) were diagnosed with an Axis II personality disorder. Seventy-eight percent (sd=10%) of the veterans were referred by another VAMC program; 5% (sd=3%) were referred from a Vet Center; 13% (sd=9%) were self-referred; and 4% (sd=5%) were referred from other sources. Eighty percent (sd=5%) of the veterans reported having a chronic medical problem which interfered with their lives; 14% (sd=4%) reported having been incarcerated for more than two weeks over their lifetime; 8% (sd=7%) were evaluated for PTSD due to sexual trauma which occurred during active military duty, and 12% (sd=6%) were evaluated for PTSD due to noncombat nonsexual trauma incurred in the course of military duties.

Table 2-1. War Zone Service and Clinical Diagnosis Among Veterans in Specialized Outpatient PTSD Programs, by VISN: FY 2003.

VISN	N	War Zone Service*	PTSD Clinical Diagnosis	Combined PTSD/PTSS Diagnosis	Substance Abuse Diagnosis	Validation By DD214
1	590	73%	76%	86%	36%	56%
2	266	83%	90%	98%	29%	71%
3	596	92%	87%	95%	34%	33%
4	239	86%	84%	94%	33%	66%
5	564	85%	73%	88%	51%	59%
6	595	89%	92%	96%	25%	79%
7	670	90%	90%	95%	37%	57%
8	578	88%	74%	88%	39%	80%
9	513	92%	95%	97%	37%	91%
10	578	88%	93%	96%	28%	86%
11	281	88%	81%	89%	43%	77%
12	226	82%	88%	96%	52%	74%
15	604	91%	89%	93%	26%	57%
16	1,233	90%	89%	93%	29%	74%
17	1,093	88%	85%	93%	44%	57%
18	670	85%	83%	97%	29%	43%
19	592	85%	98%	99%	46%	91%
20	966	77%	80%	87%	43%	76%
21	334	93%	90%	95%	28%	70%
22	664	88%	88%	95%	28%	73%
23	733	77%	63%	81%	35%	89%
TOTAL	12,585					
MEAN	599	86%	85%	93%	36%	70%
S.D	262	5%	8%	5%	8%	15%

Boxed cell indicates an outlier in the undesirable direction.

*Data for WSDTTs were not included in the formulas to determine the mean and standard deviation for War Zone Service. WSDTTs were not counted as outliers for this monitor.

Table 2-2. War Zone Service and Clinical Diagnosis Among Veterans
in Specialized Outpatient PTSD Programs: FY 2003.

VISN	FACILITY	PROGRAM	N	War Zone Service*	PTSD Clinical Diagnosis	Combined PTSD/PTSS Diagnosis	Substance Abuse Diagnosis	Validation by DD214
1	BOSTON HCS: Boston	PCT	100	75%	73%	93%	43%	60%
1	BOSTON HCS: Boston	WSDTT	65	15%	58%	58%	32%	97%
1	BOSTON HCS: Brockton	PCT	61	93%	95%	98%	59%	95%
1	BOSTON HCS: Brockton	SUPT	2	100%	100%	100%	0%	100%
1	CONNECTICUT HCS: West Haven	PCT	124	78%	67%	81%	22%	30%
1	CONNECTICUT HCS: West Haven	SUPT	58	81%	62%	72%	91%	28%
1	MANCHESTER	PCT	36	81%	94%	100%	11%	97%
1	PROVIDENCE	PCT	77	83%	90%	92%	25%	23%
1	WHITE RIVER JUNCTION	PCT	67	72%	82%	97%	18%	64%
2	CANANDAIGUA	PCT	89	76%	84%	100%	47%	71%
2	SYRACUSE	PCT	91	82%	95%	99%	20%	64%
2	WESTERN NY HCS: Batavia	PCT	86	91%	91%	94%	20%	80%
3	BRONX	PCT	46	96%	89%	98%	24%	59%
3	HUDSON VALLEY HCS: Castle Point	PCT	24	71%	83%	88%	71%	0%
3	NEW JERSEY HCS: East Orange	PCT	187	93%	96%	96%	43%	31%
3	NEW YORK HARBOR HCS: Brooklyn	PCT	215	94%	74%	92%	25%	10%
3	NEW YORK HARBOR HCS: New York	PCT	124	88%	96%	98%	41%	74%
4	COATESVILLE	PCT	92	91%	93%	98%	22%	96%
4	PHILADELPHIA	PCT	66	68%	94%	95%	39%	59%
4	PITTSBURGH HCS: Highland Drive	PCT	53	96%	72%	91%	11%	32%
4	PITTSBURGH HCS: Highland Drive	SUPT	28	89%	54%	86%	96%	50%
5	MARYLAND HCS: Baltimore	PCT	141	77%	48%	73%	47%	4%
5	MARYLAND HCS: Perry Point	PCT	143	70%	59%	92%	73%	69%
5	WASHINGTON DC	PCT	280	96%	94%	94%	41%	82%
6	ASHEVILLE	PCT	39	95%	100%	100%	21%	100%
6	DURHAM	PCT	172	81%	91%	94%	19%	81%
6	FAYETTEVILLE NC	PCT	75	95%	91%	97%	8%	100%
6	HAMPTON	PCT	172	84%	91%	98%	44%	75%
6	SALISBURY	PCT	137	98%	91%	96%	20%	64%
7	ATLANTA	PCT	83	92%	86%	93%	23%	47%
7	AUGUSTA	PCT	87	82%	91%	99%	18%	5%
7	BIRMINGHAM	PCT	70	87%	97%	100%	54%	86%
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	160	92%	98%	100%	34%	69%
7	CHARLESTON	PCT	131	89%	69%	82%	43%	27%
7	DUBLIN	PCT	139	93%	99%	99%	49%	96%
8	BAY PINES	PCT	273	94%	78%	92%	46%	79%
8	MIAMI	PCT	56	98%	73%	86%	23%	98%
8	NO.FL/SO.GA VETERANS HCS: Gainesville	PCT	174	74%	64%	83%	46%	93%
8	SAN JUAN	PCT	38	97%	87%	97%	3%	13%
8	TAMPA	PCT	37	89%	78%	84%	19%	65%
9	HUNTINGTON	PCT	172	89%	94%	94%	12%	97%
9	LEXINGTON	PCT	25	96%	100%	100%	12%	56%
9	LOUISVILLE	PCT	54	91%	87%	98%	44%	96%
9	MEMPHIS	PCT	136	96%	99%	99%	49%	93%
9	MOUNTAIN HOME	PCT	126	94%	94%	100%	60%	87%
10	BRECKSVILLE	PCT	169	94%	96%	99%	41%	92%
10	BRECKSVILLE	WSDTT	16	13%	100%	100%	25%	63%
10	CHILLICOTHE	PCT	93	92%	100%	100%	4%	100%
10	CINCINNATI	PCT	104	76%	67%	77%	56%	60%
10	COLUMBUS	PCT	114	96%	100%	100%	0%	89%
10	DAYTON	PCT	82	90%	99%	100%	37%	90%
11	ANN ARBOR HCS	PCT	107	82%	56%	73%	54%	73%
11	BATTLE CREEK	PCT	47	98%	98%	100%	26%	64%
11	DANVILLE	PCT	77	91%	96%	99%	38%	96%
11	NORTHERN IN HCS: Fort Wayne	PCT	21	95%	86%	95%	48%	95%
11	NORTHERN IN HCS: Marion	PCT	29	79%	100%	100%	38%	52%

Table 2-2. War Zone Service and Clinical Diagnosis Among Veterans
in Specialized Outpatient PTSD Programs: FY 2003.

VISN	FACILITY	PROGRAM	N	War Zone Service*	PTSD Clinical Diagnosis	Combined PTSD/PTSS Diagnosis	Substance Abuse Diagnosis	Validation by DD214
12	CHICAGO HCS: West Side	PCT	132	93%	98%	99%	59%	88%
12	HINES	PCT	58	98%	98%	100%	57%	88%
12	MADISON	WSDTT	36	17%	36%	75%	17%	0%
15	EASTERN KS HCS: Topeka	PCT	76	92%	88%	97%	51%	66%
15	KANSAS CITY	PCT	254	88%	89%	94%	38%	65%
15	POPLAR BLUFF	PCT	43	95%	100%	100%	5%	98%
15	ST. LOUIS	PCT	171	98%	99%	99%	4%	25%
15	WICHITA	PCT	60	85%	58%	62%	24%	78%
16	CENTRAL AR VETERANS HCS: No. Little Rock	PCT	184	91%	97%	100%	47%	65%
16	FAYETTEVILLE AR	PCT	145	91%	78%	94%	24%	77%
16	GULF COAST VETERANS HCS: Biloxi	PCT	200	95%	98%	98%	27%	90%
16	HOUSTON	PCT	219	89%	69%	77%	33%	44%
16	JACKSON	PCT	48	96%	90%	96%	17%	67%
16	NEW ORLEANS	PCT	356	92%	99%	100%	19%	86%
16	NEW ORLEANS	WSDTT	38	24%	79%	84%	18%	87%
16	OKLAHOMA CITY	PCT	43	86%	63%	63%	69%	91%
17	CENTRAL TX VETERANS HCS: Austin	PCT	226	86%	95%	97%	42%	12%
17	CENTRAL TX VETERANS HCS: Temple	PCT	265	85%	71%	98%	40%	13%
17	CENTRAL TX VETERANS HCS: Waco	PCT	101	97%	66%	69%	68%	92%
17	NORTH TX HCS: Dallas	PCT	203	90%	92%	93%	27%	94%
17	SOUTH TX VETERANS HCS: San Antonio	PCT	298	88%	90%	94%	52%	92%
18	EL PASO VETERANS HCS	PCT	95	91%	62%	94%	32%	24%
18	NEW MEXICO HCS: Albuquerque	PCT	270	76%	96%	100%	39%	66%
18	PHOENIX	PCT	148	96%	95%	96%	25%	49%
18	SOUTHERN AZ HCS: Tucson	PCT	157	85%	61%	97%	13%	11%
19	CHEYENNE	PCT	49	78%	94%	98%	27%	63%
19	GRAND JUNCTION	PCT	422	83%	99%	99%	58%	98%
19	SALT LAKE CITY HCS	PCT	64	94%	94%	98%	19%	67%
19	SOUTHERN CO HCS: Pueblo	PCT	57	95%	98%	100%	5%	95%
20	BOISE	PCT	70	79%	64%	83%	36%	57%
20	PORTLAND	PCT	337	66%	66%	69%	37%	100%
20	PUGET SOUND HCS: American Lake	PCT	238	82%	89%	100%	38%	82%
20	PUGET SOUND HCS: Seattle	PCT	175	83%	94%	100%	42%	18%
20	SPOKANE	PCT	146	84%	88%	92%	65%	90%
21	HONOLULU	PCT	35	94%	97%	100%	23%	91%
21	NORTHERN CA HCS	PCT	117	97%	96%	100%	12%	69%
21	PALO ALTO HCS: San Jose	PCT	60	88%	80%	90%	17%	83%
21	SAN FRANCISCO	PCT	77	90%	87%	94%	25%	56%
21	SAN FRANCISCO	SUPT	45	93%	84%	89%	95%	64%
22	GREATER LOS ANGELES HCS: East LA	PCT	78	91%	85%	90%	33%	91%
22	GREATER LOS ANGELES HCS: West LA	PCT	109	92%	83%	93%	73%	91%
22	LOMA LINDA	PCT	45	96%	93%	100%	35%	89%
22	LOMA LINDA	WSDTT	33	12%	45%	91%	12%	85%
22	SAN DIEGO HCS CA	PCT	247	90%	88%	94%	25%	38%
22	SOUTHERN NV HCS: Las Vegas	PCT	152	95%	100%	100%	1%	100%
23	BLACK HILLS HCS: Fort Meade	SUPT	176	55%	23%	49%	22%	100%
23	CENTRAL IA HCS: Knoxville	PCT	25	96%	76%	100%	52%	72%
23	IOWA CITY	PCT	219	81%	76%	91%	38%	99%
23	MINNEAPOLIS	PCT	121	83%	54%	79%	34%	56%
23	NEBRASKA-WESTERN IA HCS: Lincoln	PCT	91	82%	88%	100%	30%	100%
23	NEBRASKA-WESTERN IA HCS: Omaha	PCT	88	85%	92%	99%	56%	94%
23	SIOUX FALLS	PCT	13	85%	85%	100%	45%	8%
TOTAL			12,585					
MEAN			117	88%	84%	93%	35%	69%
S.D.			82	8%	16%	10%	20%	29%

Boxed cell indicates an outlier in the undesirable direction.

*Data for WSDTTs were not included in the formulas to determine the mean and standard deviation for War Zone Service. WSDTTs were not counted as outliers for this monitor.

Table 2-3. Prior Treatment Among Veterans in Specialized Outpatient PTSD Programs, by VISN: FY 2003.

VISN	N	Prior Psych. Treatment	Prior Spec. PTSD Treatment
1	590	76%	26%
2	266	84%	38%
3	596	54%	19%
4	239	76%	32%
5	564	71%	24%
6	595	78%	13%
7	670	74%	22%
8	578	73%	26%
9	513	72%	18%
10	578	55%	15%
11	281	73%	16%
12	226	74%	25%
15	604	74%	11%
16	1,233	69%	21%
17	1,093	76%	17%
18	670	71%	21%
19	592	86%	39%
20	966	74%	30%
21	334	59%	19%
22	664	74%	24%
23	733	64%	17%
TOTAL	12,585		
MEAN	599	72%	22%
S.D	262	8%	8%

Boxed cell indicates an outlier in the undesirable direction.

Table 2-4. Prior Treatment Among Veterans
in Specialized Outpatient PTSD Programs: FY 2003.

VISN	FACILITY	PROGRAM	N	Prior Psych. Treatment	Prior Spec. PTSD Treatment
1	BOSTON HCS: Boston	PCT	100	86%	21%
1	BOSTON HCS: Boston	WSDTT	65	94%	25%
1	BOSTON HCS: Brockton	PCT	61	77%	26%
1	BOSTON HCS: Brockton	SUPT	2	100%	0%
1	CONNECTICUT HCS: West Haven	PCT	124	68%	33%
1	CONNECTICUT HCS: West Haven	SUPT	58	86%	28%
1	MANCHESTER	PCT	36	54%	11%
1	PROVIDENCE	PCT	77	51%	18%
1	WHITE RIVER JUNCTION	PCT	67	85%	37%
2	CANANDAIGUA	PCT	89	87%	24%
2	SYRACUSE	PCT	91	75%	32%
2	WESTERN NY HCS: Batavia	PCT	86	92%	60%
3	BRONX	PCT	46	63%	22%
3	HUDSON VALLEY HCS: Castle Point	PCT	24	63%	21%
3	NEW JERSEY HCS: East Orange	PCT	187	35%	20%
3	NEW YORK HARBOR HCS: Brooklyn	PCT	215	61%	17%
3	NEW YORK HARBOR HCS: New York	PCT	124	66%	17%
4	COATESVILLE	PCT	92	87%	52%
4	PHILADELPHIA	PCT	66	72%	26%
4	PITTSBURGH HCS: Highland Drive	PCT	53	55%	4%
4	PITTSBURGH HCS: Highland Drive	SUPT	28	89%	36%
5	MARYLAND HCS: Baltimore	PCT	141	74%	31%
5	MARYLAND HCS: Perry Point	PCT	143	88%	36%
5	WASHINGTON DC	PCT	280	61%	14%
6	ASHEVILLE	PCT	39	82%	8%
6	DURHAM	PCT	172	73%	15%
6	FAYETTEVILLE NC	PCT	75	90%	17%
6	HAMPTON	PCT	172	74%	14%
6	SALISBURY	PCT	137	79%	8%
7	ATLANTA	PCT	83	79%	7%
7	AUGUSTA	PCT	87	64%	21%
7	BIRMINGHAM	PCT	70	71%	16%
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	160	62%	17%
7	CHARLESTON	PCT	131	69%	24%
7	DUBLIN	PCT	139	96%	37%
8	BAY PINES	PCT	273	79%	37%
8	MIAMI	PCT	56	83%	20%
8	NO.FL/SO.GA VETERANS HCS: Gainesville	PCT	174	61%	14%
8	SAN JUAN	PCT	38	84%	13%
8	TAMPA	PCT	37	51%	24%
9	HUNTINGTON	PCT	172	69%	34%
9	LEXINGTON	PCT	25	64%	4%
9	LOUISVILLE	PCT	54	63%	17%
9	MEMPHIS	PCT	136	82%	10%
9	MOUNTAIN HOME	PCT	126	72%	8%
10	BRECKSVILLE	PCT	169	69%	9%
10	BRECKSVILLE	WSDTT	16	81%	50%
10	CHILLICOTHE	PCT	93	40%	0%
10	CINCINNATI	PCT	104	45%	6%
10	COLUMBUS	PCT	114	39%	16%
10	DAYTON	PCT	82	74%	46%
11	ANN ARBOR HCS	PCT	107	81%	13%
11	BATTLE CREEK	PCT	47	70%	21%
11	DANVILLE	PCT	77	64%	13%
11	NORTHERN IN HCS: Fort Wayne	PCT	21	57%	33%
11	NORTHERN IN HCS: Marion	PCT	29	86%	14%

Table 2-4. Prior Treatment Among Veterans
in Specialized Outpatient PTSD Programs: FY 2003.

VISN	FACILITY	PROGRAM	N	Prior Psych. Treatment	Prior Spec. PTSD Treatment
12	CHICAGO HCS: West Side	PCT	132	69%	38%
12	HINES	PCT	58	71%	5%
12	MADISON	WSDTT	36	94%	11%
15	EASTERN KS HCS: Topeka	PCT	76	78%	16%
15	KANSAS CITY	PCT	254	76%	9%
15	POPLAR BLUFF	PCT	43	86%	12%
15	ST. LOUIS	PCT	171	69%	12%
15	WICHITA	PCT	60	65%	8%
16	CENTRAL AR VETERANS HCS: No. Little Rock	PCT	184	81%	46%
16	FAYETTEVILLE AR	PCT	145	66%	22%
16	GULF COAST VETERANS HCS: Biloxi	PCT	200	75%	25%
16	HOUSTON	PCT	219	63%	5%
16	JACKSON	PCT	48	85%	31%
16	NEW ORLEANS	PCT	356	59%	14%
16	NEW ORLEANS	WSDTT	38	89%	39%
16	OKLAHOMA CITY	PCT	43	70%	7%
17	CENTRAL TX VETERANS HCS: Austin	PCT	226	72%	12%
17	CENTRAL TX VETERANS HCS: Temple	PCT	265	76%	25%
17	CENTRAL TX VETERANS HCS: Waco	PCT	101	74%	12%
17	NORTH TX HCS: Dallas	PCT	203	95%	15%
17	SOUTH TX VETERANS HCS: San Antonio	PCT	298	67%	15%
18	EL PASO VETERANS HCS	PCT	95	61%	14%
18	NEW MEXICO HCS: Albuquerque	PCT	270	71%	16%
18	PHOENIX	PCT	148	82%	40%
18	SOUTHERN AZ HCS: Tucson	PCT	157	71%	18%
19	CHEYENNE	PCT	49	88%	41%
19	GRAND JUNCTION	PCT	422	92%	42%
19	SALT LAKE CITY HCS	PCT	64	69%	9%
19	SOUTHERN CO HCS: Pueblo	PCT	57	61%	47%
20	BOISE	PCT	70	79%	31%
20	PORTLAND	PCT	337	77%	31%
20	PUGET SOUND HCS: American Lake	PCT	238	65%	29%
20	PUGET SOUND HCS: Seattle	PCT	175	74%	27%
20	SPOKANE	PCT	146	79%	29%
21	HONOLULU	PCT	35	40%	20%
21	NORTHERN CA HCS	PCT	117	57%	15%
21	PALO ALTO HCS: San Jose	PCT	60	37%	10%
21	SAN FRANCISCO	PCT	77	72%	17%
21	SAN FRANCISCO	SUPT	45	84%	42%
22	GREATER LOS ANGELES HCS: East LA	PCT	78	69%	26%
22	GREATER LOS ANGELES HCS: West LA	PCT	109	75%	15%
22	LOMA LINDA	PCT	45	80%	24%
22	LOMA LINDA	WSDTT	33	85%	18%
22	SAN DIEGO HCS CA	PCT	247	75%	35%
22	SOUTHERN NV HCS: Las Vegas	PCT	152	71%	13%
23	BLACK HILLS HCS: Fort Meade	SUPT	176	37%	6%
23	CENTRAL IA HCS: Knoxville	PCT	25	92%	44%
23	IOWA CITY	PCT	219	72%	16%
23	MINNEAPOLIS	PCT	121	70%	22%
23	NEBRASKA-WESTERN IA HCS: Lincoln	PCT	91	59%	15%
23	NEBRASKA-WESTERN IA HCS: Omaha	PCT	88	81%	25%
23	SIOUX FALLS	PCT	13	91%	23%
TOTAL			12,585		
MEAN			117	72%	22%
S.D.			82	14%	12%

Boxed cell indicates an outlier in the undesirable direction.

Table 2-5. Sociodemographic Background and Social Functioning Among Veterans in Specialized Outpatient PTSD Programs, by VISN: FY 2003.

VISN	N	Age	High School Education Or More	Not Working	Violent Behavior
1	590	54.1	93%	69%	19%
2	266	54.3	91%	77%	14%
3	596	56.7	87%	62%	23%
4	239	53.3	95%	71%	28%
5	564	54.2	91%	62%	38%
6	595	55.4	88%	66%	34%
7	670	54.6	89%	68%	30%
8	578	55.8	90%	75%	11%
9	513	57.1	83%	74%	24%
10	578	55.5	87%	69%	16%
11	281	55.3	92%	71%	17%
12	226	52.8	90%	70%	24%
15	604	56.2	89%	63%	18%
16	1,233	55.4	85%	64%	16%
17	1,093	54.4	90%	63%	21%
18	670	55.5	90%	67%	20%
19	592	55.5	93%	70%	12%
20	966	52.6	93%	70%	21%
21	334	57.3	90%	68%	12%
22	664	55.6	82%	74%	25%
23	733	55.7	90%	59%	10%
TOTAL	12,585				
MEAN	599	55.1	89%	68%	21%
S.D	262	1.3	3%	5%	8%

Table 2-6. Sociodemographic Background and Social Functioning Among Veterans in Specialized Outpatient PTSD Programs: FY 2003.

VISN	FACILITY	PROGRAM	N	Age	High School Education Or More	Not Working	Violent Behavior
1	BOSTON HCS: Boston	PCT	100	54.4	92%	62%	12%
1	BOSTON HCS: Boston	WSDTT	65	44.1	98%	65%	11%
1	BOSTON HCS: Brockton	PCT	61	55.3	93%	78%	25%
1	BOSTON HCS: Brockton	SUPT	2	54.5	100%	0%	100%
1	CONNECTICUT HCS: West Haven	PCT	124	54.7	94%	67%	11%
1	CONNECTICUT HCS: West Haven	SUPT	58	53.9	90%	67%	16%
1	MANCHESTER	PCT	36	52.6	100%	75%	94%
1	PROVIDENCE	PCT	77	59.9	83%	66%	4%
1	WHITE RIVER JUNCTION	PCT	67	55.7	94%	81%	18%
2	CANANDAIGUA	PCT	89	54.2	89%	85%	19%
2	SYRACUSE	PCT	91	52.6	91%	66%	13%
2	WESTERN NY HCS: Batavia	PCT	86	56.1	92%	80%	8%
3	BRONX	PCT	46	55.8	87%	65%	44%
3	HUDSON VALLEY HCS: Castle Point	PCT	24	55.7	88%	50%	4%
3	NEW JERSEY HCS: East Orange	PCT	187	59.4	90%	58%	26%
3	NEW YORK HARBOR HCS: Brooklyn	PCT	215	55.7	81%	64%	8%
3	NEW YORK HARBOR HCS: New York	PCT	124	55.0	91%	66%	41%
4	COATESVILLE	PCT	92	54.7	96%	77%	41%
4	PHILADELPHIA	PCT	66	49.1	95%	70%	14%
4	PITTSBURGH HCS: Highland Drive	PCT	53	57.5	91%	56%	23%
4	PITTSBURGH HCS: Highland Drive	SUPT	28	51.0	96%	85%	32%
5	MARYLAND HCS: Baltimore	PCT	141	53.6	92%	65%	37%
5	MARYLAND HCS: Perry Point	PCT	143	51.5	91%	76%	88%
5	WASHINGTON DC	PCT	280	55.9	90%	54%	13%
6	ASHEVILLE	PCT	39	58.5	95%	82%	49%
6	DURHAM	PCT	172	54.1	89%	59%	44%
6	FAYETTEVILLE NC	PCT	75	56.4	91%	73%	49%
6	HAMPTON	PCT	172	55.2	84%	66%	12%
6	SALISBURY	PCT	137	55.9	88%	67%	37%
7	ATLANTA	PCT	83	55.8	93%	59%	32%
7	AUGUSTA	PCT	87	54.7	84%	62%	48%
7	BIRMINGHAM	PCT	70	55.1	87%	70%	66%
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	160	53.9	94%	71%	38%
7	CHARLESTON	PCT	131	53.8	95%	60%	5%
7	DUBLIN	PCT	139	54.9	81%	78%	14%
8	BAY PINES	PCT	273	56.7	91%	75%	12%
8	MIAMI	PCT	56	55.1	91%	55%	15%
8	NO.FL/SO.GA VETERANS HCS: Gainesville	PCT	174	54.0	89%	82%	7%
8	SAN JUAN	PCT	38	55.9	92%	82%	8%
8	TAMPA	PCT	37	59.4	84%	69%	14%
9	HUNTINGTON	PCT	172	57.3	91%	76%	29%
9	LEXINGTON	PCT	25	56.3	72%	76%	0%
9	LOUISVILLE	PCT	54	54.4	81%	74%	37%
9	MEMPHIS	PCT	136	59.6	74%	73%	15%
9	MOUNTAIN HOME	PCT	126	55.6	86%	74%	25%
10	BRECKSVILLE	PCT	169	58.2	81%	74%	4%
10	BRECKSVILLE	WSDTT	16	37.5	100%	50%	13%
10	CHILLICOTHE	PCT	93	57.3	97%	72%	0%
10	CINCINNATI	PCT	104	53.6	83%	62%	43%
10	COLUMBUS	PCT	114	55.2	91%	70%	20%
10	DAYTON	PCT	82	54.4	87%	63%	24%
11	ANN ARBOR HCS	PCT	107	54.6	93%	71%	12%
11	BATTLE CREEK	PCT	47	56.6	87%	78%	15%
11	DANVILLE	PCT	77	56.6	91%	73%	31%
11	NORTHERN IN HCS: Fort Wayne	PCT	21	53.5	100%	67%	5%
11	NORTHERN IN HCS: Marion	PCT	29	53.9	97%	57%	7%

Table 2-6. Sociodemographic Background and Social Functioning Among Veterans in Specialized Outpatient PTSD Programs: FY 2003.

VISN	FACILITY	PROGRAM	N	Age	High School Education Or More	Not Working	Violent Behavior
12	CHICAGO HCS: West Side	PCT	132	54.0	89%	79%	19%
12	HINES	PCT	58	56.7	86%	60%	43%
12	MADISON	WSDTT	36	42.1	100%	53%	14%
15	EASTERN KS HCS: Topeka	PCT	76	54.2	91%	63%	38%
15	KANSAS CITY	PCT	254	56.9	87%	63%	19%
15	POPLAR BLUFF	PCT	43	56.5	86%	69%	9%
15	ST. LOUIS	PCT	171	57.2	91%	62%	9%
15	WICHITA	PCT	60	52.9	92%	62%	15%
16	CENTRAL AR VETERANS HCS: No. Little Rock	PCT	184	56.1	82%	72%	24%
16	FAYETTEVILLE AR	PCT	145	56.6	76%	61%	13%
16	GULF COAST VETERANS HCS: Biloxi	PCT	200	57.0	90%	76%	34%
16	HOUSTON	PCT	219	54.2	80%	51%	13%
16	JACKSON	PCT	48	56.8	85%	69%	21%
16	NEW ORLEANS	PCT	356	55.8	89%	62%	7%
16	NEW ORLEANS	WSDTT	38	41.8	100%	63%	0%
16	OKLAHOMA CITY	PCT	43	54.8	98%	71%	12%
17	CENTRAL TX VETERANS HCS: Austin	PCT	226	54.2	92%	63%	19%
17	CENTRAL TX VETERANS HCS: Temple	PCT	265	53.0	86%	72%	14%
17	CENTRAL TX VETERANS HCS: Waco	PCT	101	55.9	92%	65%	17%
17	NORTH TX HCS: Dallas	PCT	203	54.4	92%	63%	29%
17	SOUTH TX VETERANS HCS: San Antonio	PCT	298	55.4	91%	55%	26%
18	EL PASO VETERANS HCS	PCT	95	57.2	89%	62%	25%
18	NEW MEXICO HCS: Albuquerque	PCT	270	54.5	90%	66%	13%
18	PHOENIX	PCT	148	56.0	92%	65%	10%
18	SOUTHERN AZ HCS: Tucson	PCT	157	55.6	90%	72%	38%
19	CHEYENNE	PCT	49	54.3	86%	67%	12%
19	GRAND JUNCTION	PCT	422	56.0	93%	72%	10%
19	SALT LAKE CITY HCS	PCT	64	53.9	97%	56%	24%
19	SOUTHERN CO HCS: Pueblo	PCT	57	54.4	98%	67%	17%
20	BOISE	PCT	70	53.1	97%	71%	17%
20	PORTLAND	PCT	337	51.9	89%	71%	32%
20	PUGET SOUND HCS: American Lake	PCT	238	51.1	95%	65%	11%
20	PUGET SOUND HCS: Seattle	PCT	175	53.5	96%	72%	19%
20	SPOKANE	PCT	146	55.2	92%	74%	19%
21	HONOLULU	PCT	35	59.8	91%	60%	6%
21	NORTHERN CA HCS	PCT	117	58.1	89%	77%	6%
21	PALO ALTO HCS: San Jose	PCT	60	56.7	92%	53%	17%
21	SAN FRANCISCO	PCT	77	57.7	90%	62%	9%
21	SAN FRANCISCO	SUPT	45	53.4	89%	84%	32%
22	GREATER LOS ANGELES HCS: East LA	PCT	78	55.8	0%	69%	45%
22	GREATER LOS ANGELES HCS: West LA	PCT	109	54.8	89%	83%	18%
22	LOMA LINDA	PCT	45	56.9	87%	73%	40%
22	LOMA LINDA	WSDTT	33	47.6	100%	76%	18%
22	SAN DIEGO HCS CA	PCT	247	55.9	92%	72%	21%
22	SOUTHERN NV HCS: Las Vegas	PCT	152	56.8	99%	71%	24%
23	BLACK HILLS HCS: Fort Meade	SUPT	176	59.9	89%	44%	10%
23	CENTRAL IA HCS: Knoxville	PCT	25	53.8	88%	84%	24%
23	IOWA CITY	PCT	219	54.3	92%	65%	10%
23	MINNEAPOLIS	PCT	121	53.0	90%	53%	11%
23	NEBRASKA-WESTERN IA HCS: Lincoln	PCT	91	58.9	90%	76%	1%
23	NEBRASKA-WESTERN IA HCS: Omaha	PCT	88	52.2	88%	65%	15%
23	SIOUX FALLS	PCT	13	54.2	100%	31%	0%
TOTAL			12,585				
MEAN			117	54.7	90%	67%	22%
S.D.			82	3.4	10%	11%	18%

Table 2-7. Critical Monitors: Summary of Outliers for Specialized Outpatient PTSD Programs, by VISN: FY 2003.

VISN	# of Progs.	War Zone Service*	PTSD Clinical Diagnosis	Subs. Abuse Dx	Valid. by DD214	Prior Psych. Tx	Prior Spec. PTSD Tx	Total # of Outliers	Mean # Outliers/ Program
1	9	3	3	2	3	2	1	14	1.6
2	3	1				2	1	4	1.3
3	5	1			3			4	0.8
4	4	1	1	1	1	2	2	8	2.0
5	3	2	2		1	1	1	7	2.3
6	5			1		1		2	0.4
7	6				2	1	1	4	0.7
8	5	1	1	1	1		1	5	1.0
9	5			2			1	3	0.6
10	6	1	1	2			2	6	1.0
11	5	1	1					2	0.4
12	3		1		1	1	1	4	1.3
15	5		1	2	1			4	0.8
16	8		1			1	2	4	0.5
17	5		1		2	1		4	0.8
18	4	1	2	1	2		1	7	1.8
19	4	1		1		2	3	7	1.8
20	5	2	2		1			5	1.0
21	5			1			1	2	0.4
22	6		1	2	1		1	5	0.8
23	7	1	2		1	2	1	7	1.0
TOTAL	108	16	20	16	20	14	20	108	
MEAN									1.0
S.D.									0.6

Boxed cell signifies an outlier in the undesirable direction.

*Data for WSDTTs were excluded from these calculations for War Zone Service. WSDTTs were not counted as outliers for this monitor.

Table 2-8. Gender and Marital Status Among Veterans in Specialized Outpatient PTSD Programs, by VISN: FY 2003.

VISN	N	Male	Married	Separated or Divorced	Never Married
1	590	83%	47%	35%	15%
2	266	92%	57%	30%	11%
3	596	98%	56%	30%	11%
4	239	93%	57%	32%	9%
5	564	97%	47%	38%	11%
6	595	98%	58%	33%	7%
7	670	96%	62%	30%	7%
8	578	97%	51%	44%	4%
9	513	98%	69%	24%	4%
10	578	95%	61%	29%	6%
11	281	98%	54%	37%	7%
12	226	82%	41%	39%	16%
15	604	98%	60%	32%	5%
16	1,233	95%	62%	31%	5%
17	1,093	96%	60%	33%	5%
18	670	95%	62%	29%	8%
19	592	94%	57%	34%	5%
20	966	90%	52%	37%	8%
21	334	98%	55%	37%	6%
22	664	93%	46%	40%	12%
23	733	93%	62%	28%	7%
TOTAL	12,585				
MEAN	599	94%	56%	33%	8%
S.D	262	4%	7%	5%	3%

Table 2-9. Gender and Marital Status Among Veterans in Specialized Outpatient PTSD Programs: FY 2003.

VISN	FACILITY	PROGRAM	N	Male	Married	Separated or Divorced	Never Married
1	BOSTON HCS: Boston	PCT	100	99%	43%	42%	13%
1	BOSTON HCS: Boston	WSDTT	65	0%	18%	37%	43%
1	BOSTON HCS: Brockton	PCT	61	98%	45%	43%	12%
1	BOSTON HCS: Brockton	SUPT	2	100%	100%	0%	0%
1	CONNECTICUT HCS: West Haven	PCT	124	91%	58%	26%	10%
1	CONNECTICUT HCS: West Haven	SUPT	58	98%	34%	50%	13%
1	MANCHESTER	PCT	36	100%	56%	33%	8%
1	PROVIDENCE	PCT	77	94%	53%	30%	14%
1	WHITE RIVER JUNCTION	PCT	67	78%	60%	28%	12%
2	CANANDAIGUA	PCT	89	96%	49%	34%	13%
2	SYRACUSE	PCT	91	87%	58%	30%	10%
2	WESTERN NY HCS: Batavia	PCT	86	95%	64%	24%	10%
3	BRONX	PCT	46	100%	54%	28%	15%
3	HUDSON VALLEY HCS: Castle Point	PCT	24	96%	63%	33%	4%
3	NEW JERSEY HCS: East Orange	PCT	187	98%	64%	25%	8%
3	NEW YORK HARBOR HCS: Brooklyn	PCT	215	98%	53%	31%	10%
3	NEW YORK HARBOR HCS: New York	PCT	124	98%	45%	33%	20%
4	COATESVILLE	PCT	92	99%	65%	24%	10%
4	PHILADELPHIA	PCT	66	77%	45%	40%	12%
4	PITTSBURGH HCS: Highland Drive	PCT	53	100%	64%	28%	6%
4	PITTSBURGH HCS: Highland Drive	SUPT	28	100%	43%	46%	7%
5	MARYLAND HCS: Baltimore	PCT	141	94%	45%	34%	15%
5	MARYLAND HCS: Perry Point	PCT	143	97%	44%	45%	10%
5	WASHINGTON DC	PCT	280	98%	51%	36%	10%
6	ASHEVILLE	PCT	39	97%	69%	21%	8%
6	DURHAM	PCT	172	97%	58%	33%	8%
6	FAYETTEVILLE NC	PCT	75	100%	70%	20%	5%
6	HAMPTON	PCT	172	97%	44%	43%	9%
6	SALISBURY	PCT	137	99%	64%	30%	3%
7	ATLANTA	PCT	83	100%	61%	30%	7%
7	AUGUSTA	PCT	87	89%	67%	28%	2%
7	BIRMINGHAM	PCT	70	99%	73%	24%	3%
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	160	98%	56%	34%	8%
7	CHARLESTON	PCT	131	98%	66%	25%	7%
7	DUBLIN	PCT	139	94%	56%	32%	9%
8	BAY PINES	PCT	273	100%	49%	45%	4%
8	MIAMI	PCT	56	98%	45%	46%	9%
8	NO.FL/SO.GA VETERANS HCS: Gainesville	PCT	174	94%	46%	49%	3%
8	SAN JUAN	PCT	38	97%	76%	24%	0%
8	TAMPA	PCT	37	95%	73%	19%	5%
9	HUNTINGTON	PCT	172	100%	73%	19%	4%
9	LEXINGTON	PCT	25	100%	80%	12%	4%
9	LOUISVILLE	PCT	54	94%	67%	31%	2%
9	MEMPHIS	PCT	136	99%	63%	28%	4%
9	MOUNTAIN HOME	PCT	126	97%	67%	27%	4%
10	BRECKSVILLE	PCT	169	100%	65%	26%	5%
10	BRECKSVILLE	WSDTT	16	0%	19%	31%	38%
10	CHILLICOTHE	PCT	93	100%	61%	30%	4%
10	CINCINNATI	PCT	104	91%	60%	28%	10%
10	COLUMBUS	PCT	114	100%	61%	32%	5%
10	DAYTON	PCT	82	93%	62%	31%	4%
11	ANN ARBOR HCS	PCT	107	97%	46%	42%	10%
11	BATTLE CREEK	PCT	47	100%	61%	33%	4%
11	DANVILLE	PCT	77	100%	60%	35%	5%
11	NORTHERN IN HCS: Fort Wayne	PCT	21	95%	45%	45%	10%
11	NORTHERN IN HCS: Marion	PCT	29	90%	62%	28%	3%

Table 2-9. Gender and Marital Status Among Veterans in Specialized Outpatient PTSD Programs: FY 2003.

VISN	FACILITY	PROGRAM	N	Male	Married	Separated or Divorced	Never Married
12	CHICAGO HCS: West Side	PCT	132	99%	37%	38%	18%
12	HINES	PCT	58	95%	61%	34%	5%
12	MADISON	WSDTT	36	0%	28%	50%	22%
15	EASTERN KS HCS: Topeka	PCT	76	100%	54%	34%	9%
15	KANSAS CITY	PCT	254	96%	60%	32%	5%
15	POPLAR BLUFF	PCT	43	100%	81%	16%	2%
15	ST. LOUIS	PCT	171	99%	55%	36%	5%
15	WICHITA	PCT	60	100%	63%	30%	5%
16	CENTRAL AR VETERANS HCS: No. Little Rock	PCT	184	97%	61%	29%	4%
16	FAYETTEVILLE AR	PCT	145	99%	71%	26%	1%
16	GULF COAST VETERANS HCS: Biloxi	PCT	200	100%	67%	28%	1%
16	HOUSTON	PCT	219	95%	64%	31%	5%
16	JACKSON	PCT	48	98%	64%	30%	4%
16	NEW ORLEANS	PCT	356	100%	57%	32%	6%
16	NEW ORLEANS	WSDTT	38	0%	29%	42%	29%
16	OKLAHOMA CITY	PCT	43	95%	60%	40%	0%
17	CENTRAL TX VETERANS HCS: Austin	PCT	226	97%	50%	41%	6%
17	CENTRAL TX VETERANS HCS: Temple	PCT	265	91%	50%	42%	5%
17	CENTRAL TX VETERANS HCS: Waco	PCT	101	100%	69%	27%	4%
17	NORTH TX HCS: Dallas	PCT	203	97%	62%	30%	6%
17	SOUTH TX VETERANS HCS: San Antonio	PCT	298	97%	71%	24%	4%
18	EL PASO VETERANS HCS	PCT	95	94%	67%	25%	5%
18	NEW MEXICO HCS: Albuquerque	PCT	270	91%	60%	29%	9%
18	PHOENIX	PCT	148	99%	60%	30%	10%
18	SOUTHERN AZ HCS: Tucson	PCT	157	99%	62%	32%	5%
19	CHEYENNE	PCT	49	82%	58%	31%	8%
19	GRAND JUNCTION	PCT	422	94%	57%	37%	3%
19	SALT LAKE CITY HCS	PCT	64	97%	60%	30%	6%
19	SOUTHERN CO HCS: Pueblo	PCT	57	100%	60%	21%	14%
20	BOISE	PCT	70	100%	66%	28%	6%
20	PORTLAND	PCT	337	88%	44%	41%	11%
20	PUGET SOUND HCS: American Lake	PCT	238	87%	63%	28%	8%
20	PUGET SOUND HCS: Seattle	PCT	175	93%	51%	40%	7%
20	SPOKANE	PCT	146	90%	51%	42%	5%
21	HONOLULU	PCT	35	100%	63%	31%	0%
21	NORTHERN CA HCS	PCT	117	99%	58%	34%	5%
21	PALO ALTO HCS: San Jose	PCT	60	100%	65%	32%	3%
21	SAN FRANCISCO	PCT	77	92%	61%	30%	6%
21	SAN FRANCISCO	SUPT	45	100%	16%	68%	14%
22	GREATER LOS ANGELES HCS: East LA	PCT	78	96%	47%	37%	12%
22	GREATER LOS ANGELES HCS: West LA	PCT	109	98%	18%	59%	21%
22	LOMA LINDA	PCT	45	100%	64%	33%	0%
22	LOMA LINDA	WSDTT	33	3%	39%	36%	21%
22	SAN DIEGO HCS CA	PCT	247	96%	48%	38%	12%
22	SOUTHERN NV HCS: Las Vegas	PCT	152	100%	56%	34%	6%
23	BLACK HILLS HCS: Fort Meade	SUPT	176	93%	72%	22%	3%
23	CENTRAL IA HCS: Knoxville	PCT	25	100%	44%	52%	4%
23	IOWA CITY	PCT	219	93%	56%	34%	6%
23	MINNEAPOLIS	PCT	121	95%	62%	30%	7%
23	NEBRASKA-WESTERN IA HCS: Lincoln	PCT	91	96%	70%	12%	14%
23	NEBRASKA-WESTERN IA HCS: Omaha	PCT	88	89%	58%	34%	6%
23	SIOUX FALLS	PCT	13	85%	62%	23%	8%
TOTAL			12,585				
MEAN			117	92%	57%	33%	8%
S.D.			82	21%	13%	9%	7%

Table 2-10. Race/Ethnicity Among Veterans in Specialized Outpatient PTSD Programs, by VISN: FY 2003.

VISN	N	Caucasian	African American	Hispanic	Other
1	590	84%	12%	2%	2%
2	266	83%	9%	2%	6%
3	596	51%	34%	12%	2%
4	239	72%	26%	1%	1%
5	564	33%	62%	2%	3%
6	595	51%	44%	2%	3%
7	670	48%	50%	1%	1%
8	578	71%	16%	12%	2%
9	513	85%	12%	0%	2%
10	578	79%	19%	1%	1%
11	281	83%	11%	3%	4%
12	226	41%	54%	4%	2%
15	604	77%	19%	1%	3%
16	1,233	56%	37%	4%	2%
17	1,093	54%	21%	24%	2%
18	670	57%	4%	34%	6%
19	592	90%	1%	8%	1%
20	966	76%	12%	4%	8%
21	334	63%	16%	10%	11%
22	664	56%	25%	14%	6%
23	733	91%	4%	2%	3%
TOTAL	12,585				
MEAN	599	67%	23%	7%	3%
S.D	262	17%	17%	9%	3%

Boxed cell indicates an outlier in the undesirable direction.

Table 2-11. Race/Ethnicity Among Veterans in Specialized Outpatient PTSD Programs: FY 2003.

VISN	FACILITY	PROGRAM	N	Caucasian	African American	Hispanic	Other
1	BOSTON HCS: Boston	PCT	100	79%	14%	4%	3%
1	BOSTON HCS: Boston	WSDTT	65	77%	15%	3%	5%
1	BOSTON HCS: Brockton	PCT	61	89%	10%	0%	2%
1	BOSTON HCS: Brockton	SUPT	2	100%	0%	0%	0%
1	CONNECTICUT HCS: West Haven	PCT	124	84%	11%	3%	2%
1	CONNECTICUT HCS: West Haven	SUPT	58	67%	29%	3%	0%
1	MANCHESTER	PCT	36	97%	3%	0%	0%
1	PROVIDENCE	PCT	77	90%	8%	3%	0%
1	WHITE RIVER JUNCTION	PCT	67	93%	0%	0%	7%
2	CANANDAIGUA	PCT	89	76%	12%	1%	10%
2	SYRACUSE	PCT	91	82%	10%	3%	4%
2	WESTERN NY HCS: Batavia	PCT	86	92%	3%	2%	2%
3	BRONX	PCT	46	17%	50%	28%	4%
3	HUDSON VALLEY HCS: Castle Point	PCT	24	79%	8%	13%	0%
3	NEW JERSEY HCS: East Orange	PCT	187	61%	34%	3%	2%
3	NEW YORK HARBOR HCS: Brooklyn	PCT	215	58%	31%	12%	0%
3	NEW YORK HARBOR HCS: New York	PCT	124	32%	40%	22%	6%
4	COATESVILLE	PCT	92	83%	16%	0%	1%
4	PHILADELPHIA	PCT	66	45%	50%	3%	2%
4	PITTSBURGH HCS: Highland Drive	PCT	53	89%	9%	0%	2%
4	PITTSBURGH HCS: Highland Drive	SUPT	28	68%	32%	0%	0%
5	MARYLAND HCS: Baltimore	PCT	141	39%	50%	1%	10%
5	MARYLAND HCS: Perry Point	PCT	143	55%	41%	2%	1%
5	WASHINGTON DC	PCT	280	19%	78%	3%	1%
6	ASHEVILLE	PCT	39	90%	10%	0%	0%
6	DURHAM	PCT	172	37%	58%	3%	2%
6	FAYETTEVILLE NC	PCT	75	37%	51%	3%	9%
6	HAMPTON	PCT	172	44%	52%	2%	2%
6	SALISBURY	PCT	137	72%	24%	1%	2%
7	ATLANTA	PCT	83	53%	43%	2%	1%
7	AUGUSTA	PCT	87	57%	37%	2%	3%
7	BIRMINGHAM	PCT	70	56%	44%	0%	0%
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	160	36%	63%	0%	1%
7	CHARLESTON	PCT	131	44%	54%	0%	2%
7	DUBLIN	PCT	139	51%	47%	2%	0%
8	BAY PINES	PCT	273	84%	12%	3%	2%
8	MIAMI	PCT	56	34%	39%	27%	0%
8	NO.FL/SO.GA VETERANS HCS: Gainesville	PCT	174	75%	18%	5%	2%
8	SAN JUAN	PCT	38	3%	0%	97%	0%
8	TAMPA	PCT	37	81%	14%	5%	0%
9	HUNTINGTON	PCT	172	95%	0%	0%	5%
9	LEXINGTON	PCT	25	96%	4%	0%	0%
9	LOUISVILLE	PCT	54	85%	13%	0%	2%
9	MEMPHIS	PCT	136	63%	35%	1%	0%
9	MOUNTAIN HOME	PCT	126	94%	4%	0%	2%
10	BRECKSVILLE	PCT	169	81%	17%	1%	1%
10	BRECKSVILLE	WSDTT	16	44%	50%	6%	0%
10	CHILLICOTHE	PCT	93	99%	1%	0%	0%
10	CINCINNATI	PCT	104	69%	28%	0%	3%
10	COLUMBUS	PCT	114	74%	25%	0%	2%
10	DAYTON	PCT	82	78%	21%	0%	1%
11	ANN ARBOR HCS	PCT	107	82%	13%	2%	3%
11	BATTLE CREEK	PCT	47	74%	15%	6%	4%
11	DANVILLE	PCT	77	88%	8%	1%	3%
11	NORTHERN IN HCS: Fort Wayne	PCT	21	81%	10%	10%	0%
11	NORTHERN IN HCS: Marion	PCT	29	83%	3%	3%	10%

Table 2-11. Race/Ethnicity Among Veterans in Specialized Outpatient PTSD Programs: FY 2003.

VISN	FACILITY	PROGRAM	N	Caucasian	African American	Hispanic	Other
12	CHICAGO HCS: West Side	PCT	132	17%	78%	5%	0%
12	HINES	PCT	58	76%	21%	0%	3%
12	MADISON	WSDTT	36	69%	19%	6%	6%
15	EASTERN KS HCS: Topeka	PCT	76	75%	16%	4%	5%
15	KANSAS CITY	PCT	254	76%	22%	2%	1%
15	POPLAR BLUFF	PCT	43	98%	2%	0%	0%
15	ST. LOUIS	PCT	171	70%	25%	1%	5%
15	WICHITA	PCT	60	85%	10%	0%	5%
16	CENTRAL AR VETERANS HCS: No. Little Rock	PCT	184	64%	36%	1%	0%
16	FAYETTEVILLE AR	PCT	145	91%	2%	1%	6%
16	GULF COAST VETERANS HCS: Biloxi	PCT	200	69%	25%	3%	4%
16	HOUSTON	PCT	219	39%	42%	17%	1%
16	JACKSON	PCT	48	79%	15%	0%	6%
16	NEW ORLEANS	PCT	356	40%	59%	1%	0%
16	NEW ORLEANS	WSDTT	38	21%	76%	0%	3%
16	OKLAHOMA CITY	PCT	43	86%	7%	0%	7%
17	CENTRAL TX VETERANS HCS: Austin	PCT	226	58%	21%	19%	1%
17	CENTRAL TX VETERANS HCS: Temple	PCT	265	60%	26%	12%	2%
17	CENTRAL TX VETERANS HCS: Waco	PCT	101	66%	26%	6%	2%
17	NORTH TX HCS: Dallas	PCT	203	64%	27%	7%	3%
17	SOUTH TX VETERANS HCS: San Antonio	PCT	298	35%	9%	55%	1%
18	EL PASO VETERANS HCS	PCT	95	38%	2%	57%	3%
18	NEW MEXICO HCS: Albuquerque	PCT	270	42%	3%	45%	10%
18	PHOENIX	PCT	148	77%	6%	15%	2%
18	SOUTHERN AZ HCS: Tucson	PCT	157	75%	4%	18%	3%
19	CHEYENNE	PCT	49	88%	0%	12%	0%
19	GRAND JUNCTION	PCT	422	93%	0%	5%	1%
19	SALT LAKE CITY HCS	PCT	64	92%	2%	5%	2%
19	SOUTHERN CO HCS: Pueblo	PCT	57	67%	2%	30%	2%
20	BOISE	PCT	70	96%	0%	1%	3%
20	PORTLAND	PCT	337	80%	5%	3%	12%
20	PUGET SOUND HCS: American Lake	PCT	238	60%	26%	8%	6%
20	PUGET SOUND HCS: Seattle	PCT	175	69%	20%	3%	9%
20	SPOKANE	PCT	146	94%	1%	2%	3%
21	HONOLULU	PCT	35	26%	0%	3%	71%
21	NORTHERN CA HCS	PCT	117	74%	14%	10%	3%
21	PALO ALTO HCS: San Jose	PCT	60	65%	8%	20%	7%
21	SAN FRANCISCO	PCT	77	75%	12%	8%	5%
21	SAN FRANCISCO	SUPT	45	42%	49%	7%	2%
22	GREATER LOS ANGELES HCS: East LA	PCT	78	23%	33%	38%	5%
22	GREATER LOS ANGELES HCS: West LA	PCT	109	25%	58%	12%	6%
22	LOMA LINDA	PCT	45	62%	16%	18%	4%
22	LOMA LINDA	WSDTT	33	79%	9%	6%	6%
22	SAN DIEGO HCS CA	PCT	247	62%	19%	11%	8%
22	SOUTHERN NV HCS: Las Vegas	PCT	152	76%	13%	6%	5%
23	BLACK HILLS HCS: Fort Meade	SUPT	176	90%	2%	1%	7%
23	CENTRAL IA HCS: Knoxville	PCT	25	92%	8%	0%	0%
23	IOWA CITY	PCT	219	97%	2%	0%	0%
23	MINNEAPOLIS	PCT	121	86%	6%	4%	4%
23	NEBRASKA-WESTERN IA HCS: Lincoln	PCT	91	93%	5%	0%	1%
23	NEBRASKA-WESTERN IA HCS: Omaha	PCT	88	82%	11%	3%	3%
23	SIOUX FALLS	PCT	13	92%	0%	0%	8%
TOTAL			12,585				
MEAN			117	68%	21%	7%	4%
S.D.			82	23%	19%	14%	7%

Table 2-12. War-Time Service Eras Among Veterans in Specialized
Outpatient PTSD Programs, by VISN: FY 2003.

VISN	N	World War II	Korea	Vietnam	Persian Gulf
1	590	6%	3%	65%	11%
2	266	6%	4%	66%	13%
3	596	4%	6%	77%	7%
4	239	3%	4%	77%	10%
5	564	1%	4%	74%	11%
6	595	3%	4%	79%	10%
7	670	2%	3%	77%	14%
8	578	5%	5%	75%	10%
9	513	6%	4%	82%	5%
10	578	8%	4%	69%	12%
11	281	6%	3%	75%	7%
12	226	1%	1%	77%	12%
15	604	5%	6%	77%	7%
16	1,233	4%	4%	78%	11%
17	1,093	3%	4%	76%	15%
18	670	5%	4%	76%	9%
19	592	5%	4%	80%	6%
20	966	2%	3%	67%	19%
21	334	7%	6%	79%	6%
22	664	3%	6%	77%	9%
23	733	9%	7%	64%	14%
TOTAL	12,585				
MEAN	599	4%	4%	75%	11%
S.D	262	2%	1%	5%	4%

Table 2-13. War-Time Service Eras Among Veterans in Specialized Outpatient PTSD Programs: FY 2003.

VISN	FACILITY	PROGRAM	N	World War II	Korea	Vietnam	Persian Gulf
1	BOSTON HCS: Boston	PCT	100	5%	0%	73%	6%
1	BOSTON HCS: Boston	WSDTT	65	2%	3%	20%	43%
1	BOSTON HCS: Brockton	PCT	61	5%	5%	74%	8%
1	BOSTON HCS: Brockton	SUPT	2	0%	0%	100%	0%
1	CONNECTICUT HCS: West Haven	PCT	124	5%	4%	70%	8%
1	CONNECTICUT HCS: West Haven	SUPT	58	2%	2%	79%	5%
1	MANCHESTER	PCT	36	0%	0%	86%	6%
1	PROVIDENCE	PCT	77	22%	4%	57%	8%
1	WHITE RIVER JUNCTION	PCT	67	7%	6%	61%	9%
2	CANANDAIGUA	PCT	89	10%	4%	57%	12%
2	SYRACUSE	PCT	91	3%	4%	65%	18%
2	WESTERN NY HCS: Batavia	PCT	86	6%	2%	77%	9%
3	BRONX	PCT	46	0%	2%	91%	7%
3	HUDSON VALLEY HCS: Castle Point	PCT	24	8%	0%	71%	17%
3	NEW JERSEY HCS: East Orange	PCT	187	6%	10%	71%	3%
3	NEW YORK HARBOR HCS: Brooklyn	PCT	215	2%	7%	80%	10%
3	NEW YORK HARBOR HCS: New York	PCT	124	5%	1%	77%	7%
4	COATESVILLE	PCT	92	1%	5%	84%	4%
4	PHILADELPHIA	PCT	66	2%	0%	62%	20%
4	PITTSBURGH HCS: Highland Drive	PCT	53	8%	8%	83%	4%
4	PITTSBURGH HCS: Highland Drive	SUPT	28	0%	0%	75%	18%
5	MARYLAND HCS: Baltimore	PCT	141	4%	5%	64%	11%
5	MARYLAND HCS: Perry Point	PCT	143	0%	0%	67%	14%
5	WASHINGTON DC	PCT	280	1%	5%	83%	9%
6	ASHEVILLE	PCT	39	10%	10%	72%	5%
6	DURHAM	PCT	172	2%	3%	72%	10%
6	FAYETTEVILLE NC	PCT	75	1%	3%	89%	11%
6	HAMPTON	PCT	172	2%	3%	75%	13%
6	SALISBURY	PCT	137	1%	3%	91%	6%
7	ATLANTA	PCT	83	1%	4%	88%	7%
7	AUGUSTA	PCT	87	1%	6%	74%	18%
7	BIRMINGHAM	PCT	70	3%	3%	77%	16%
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	160	2%	5%	71%	22%
7	CHARLESTON	PCT	131	3%	0%	79%	13%
7	DUBLIN	PCT	139	1%	3%	80%	9%
8	BAY PINES	PCT	273	5%	4%	82%	7%
8	MIAMI	PCT	56	7%	0%	70%	20%
8	NO.FL/SO.GA VETERANS HCS: Gainesville	PCT	174	4%	6%	68%	10%
8	SAN JUAN	PCT	38	0%	13%	71%	13%
8	TAMPA	PCT	37	11%	11%	68%	5%
9	HUNTINGTON	PCT	172	3%	5%	84%	2%
9	LEXINGTON	PCT	25	4%	4%	84%	4%
9	LOUISVILLE	PCT	54	0%	0%	85%	9%
9	MEMPHIS	PCT	136	15%	4%	75%	3%
9	MOUNTAIN HOME	PCT	126	2%	6%	85%	10%
10	BRECKSVILLE	PCT	169	15%	7%	66%	9%
10	BRECKSVILLE	WSDTT	16	0%	0%	0%	56%
10	CHILLICOTHE	PCT	93	13%	0%	78%	5%
10	CINCINNATI	PCT	104	6%	4%	59%	15%
10	COLUMBUS	PCT	114	3%	3%	78%	13%
10	DAYTON	PCT	82	2%	2%	82%	9%
11	ANN ARBOR HCS	PCT	107	5%	3%	73%	9%
11	BATTLE CREEK	PCT	47	4%	4%	83%	6%
11	DANVILLE	PCT	77	13%	1%	68%	6%
11	NORTHERN IN HCS: Fort Wayne	PCT	21	5%	0%	86%	10%
11	NORTHERN IN HCS: Marion	PCT	29	0%	7%	79%	3%

Table 2-13. War-Time Service Eras Among Veterans in Specialized Outpatient PTSD Programs: FY 2003.

VISN	FACILITY	PROGRAM	N	World War II	Korea	Vietnam	Persian Gulf
12	CHICAGO HCS: West Side	PCT	132	0%	0%	90%	3%
12	HINES	PCT	58	3%	5%	86%	2%
12	MADISON	WSDTT	36	0%	0%	17%	61%
15	EASTERN KS HCS: Topeka	PCT	76	0%	5%	79%	12%
15	KANSAS CITY	PCT	254	7%	7%	72%	6%
15	POPLAR BLUFF	PCT	43	0%	7%	88%	2%
15	ST. LOUIS	PCT	171	4%	7%	83%	6%
15	WICHITA	PCT	60	3%	2%	77%	12%
16	CENTRAL AR VETERANS HCS: No. Little Rock	PCT	184	7%	2%	78%	8%
16	FAYETTEVILLE AR	PCT	145	4%	6%	74%	10%
16	GULF COAST VETERANS HCS: Biloxi	PCT	200	4%	7%	83%	9%
16	HOUSTON	PCT	219	0%	1%	86%	9%
16	JACKSON	PCT	48	8%	0%	83%	8%
16	NEW ORLEANS	PCT	356	4%	5%	79%	9%
16	NEW ORLEANS	WSDTT	38	0%	0%	11%	63%
16	OKLAHOMA CITY	PCT	43	2%	9%	74%	7%
17	CENTRAL TX VETERANS HCS: Austin	PCT	226	4%	2%	76%	12%
17	CENTRAL TX VETERANS HCS: Temple	PCT	265	2%	4%	72%	23%
17	CENTRAL TX VETERANS HCS: Waco	PCT	101	4%	3%	80%	12%
17	NORTH TX HCS: Dallas	PCT	203	6%	2%	73%	14%
17	SOUTH TX VETERANS HCS: San Antonio	PCT	298	1%	6%	81%	12%
18	EL PASO VETERANS HCS	PCT	95	8%	6%	78%	12%
18	NEW MEXICO HCS: Albuquerque	PCT	270	5%	5%	69%	10%
18	PHOENIX	PCT	148	5%	2%	83%	7%
18	SOUTHERN AZ HCS: Tucson	PCT	157	4%	3%	81%	9%
19	CHEYENNE	PCT	49	4%	0%	82%	10%
19	GRAND JUNCTION	PCT	422	5%	3%	81%	3%
19	SALT LAKE CITY HCS	PCT	64	3%	6%	86%	13%
19	SOUTHERN CO HCS: Pueblo	PCT	57	4%	9%	68%	14%
20	BOISE	PCT	70	0%	4%	73%	14%
20	PORTLAND	PCT	337	1%	2%	66%	20%
20	PUGET SOUND HCS: American Lake	PCT	238	2%	2%	58%	31%
20	PUGET SOUND HCS: Seattle	PCT	175	2%	4%	73%	14%
20	SPOKANE	PCT	146	5%	2%	76%	9%
21	HONOLULU	PCT	35	9%	14%	63%	14%
21	NORTHERN CA HCS	PCT	117	10%	6%	86%	7%
21	PALO ALTO HCS: San Jose	PCT	60	3%	5%	78%	5%
21	SAN FRANCISCO	PCT	77	9%	5%	74%	4%
21	SAN FRANCISCO	SUPT	45	0%	0%	80%	4%
22	GREATER LOS ANGELES HCS: East LA	PCT	78	5%	5%	77%	8%
22	GREATER LOS ANGELES HCS: West LA	PCT	109	4%	3%	81%	6%
22	LOMA LINDA	PCT	45	0%	7%	91%	0%
22	LOMA LINDA	WSDTT	33	0%	3%	27%	33%
22	SAN DIEGO HCS CA	PCT	247	4%	6%	78%	11%
22	SOUTHERN NV HCS: Las Vegas	PCT	152	3%	8%	82%	9%
23	BLACK HILLS HCS: Fort Meade	SUPT	176	15%	19%	47%	14%
23	CENTRAL IA HCS: Knoxville	PCT	25	4%	4%	72%	20%
23	IOWA CITY	PCT	219	6%	4%	68%	15%
23	MINNEAPOLIS	PCT	121	1%	1%	79%	11%
23	NEBRASKA-WESTERN IA HCS: Lincoln	PCT	91	18%	7%	58%	9%
23	NEBRASKA-WESTERN IA HCS: Omaha	PCT	88	3%	5%	69%	22%
23	SIOUX FALLS	PCT	13	15%	0%	62%	23%
TOTAL			12,585				
MEAN			117	4%	4%	73%	12%
S.D.			82	4%	3%	16%	11%

Table 2-14. Traumatic Exposure and Service Connection Among Veterans in Specialized Outpatient PTSD Programs, by VISN: FY 2003.

VISN	N	Exposed to Enemy/ Friendly Fire	Participated In Atrocities	Prisoner of War	Service Connected
1	590	69%	3%	3%	56%
2	266	83%	9%	4%	65%
3	596	88%	3%	3%	54%
4	239	82%	4%	2%	63%
5	564	82%	12%	2%	51%
6	595	84%	4%	2%	58%
7	670	86%	7%	1%	60%
8	578	83%	9%	3%	63%
9	513	92%	4%	2%	66%
10	578	87%	6%	2%	50%
11	281	84%	6%	4%	50%
12	226	76%	7%	0%	62%
15	604	89%	11%	2%	59%
16	1,233	85%	6%	1%	58%
17	1,093	84%	5%	2%	67%
18	670	81%	8%	3%	64%
19	592	80%	8%	2%	73%
20	966	72%	6%	2%	67%
21	334	88%	10%	1%	60%
22	664	85%	9%	2%	58%
23	733	69%	5%	1%	61%
TOTAL	12,585				
MEAN	599	82%	7%	2%	60%
S.D	262	6%	2%	1%	6%

Table 2-15. Traumatic Exposure and Service Connection Among Veterans in Specialized Outpatient PTSD Programs: FY 2003.

VISN	FACILITY	PROGRAM	N	Exposed to Enemy/ Friendly Fire	Participated In Atrocities	Prisoner of War	Service Connected
1	BOSTON HCS: Boston	PCT	100	73%	5%	1%	49%
1	BOSTON HCS: Boston	WSDTT	65	9%	0%	0%	51%
1	BOSTON HCS: Brockton	PCT	61	90%	0%	2%	61%
1	BOSTON HCS: Brockton	SUPT	2	100%	0%	0%	100%
1	CONNECTICUT HCS: West Haven	PCT	124	74%	3%	6%	48%
1	CONNECTICUT HCS: West Haven	SUPT	58	81%	7%	2%	36%
1	MANCHESTER	PCT	36	78%	3%	6%	81%
1	PROVIDENCE	PCT	77	77%	3%	3%	62%
1	WHITE RIVER JUNCTION	PCT	67	70%	3%	1%	79%
2	CANANDAIGUA	PCT	89	76%	7%	6%	52%
2	SYRACUSE	PCT	91	82%	13%	2%	60%
2	WESTERN NY HCS: Batavia	PCT	86	90%	8%	5%	85%
3	BRONX	PCT	46	89%	11%	0%	52%
3	HUDSON VALLEY HCS: Castle Point	PCT	24	63%	8%	4%	71%
3	NEW JERSEY HCS: East Orange	PCT	187	92%	0%	3%	59%
3	NEW YORK HARBOR HCS: Brooklyn	PCT	215	89%	0%	3%	51%
3	NEW YORK HARBOR HCS: New York	PCT	124	83%	10%	2%	48%
4	COATESVILLE	PCT	92	89%	3%	2%	79%
4	PHILADELPHIA	PCT	66	59%	2%	0%	53%
4	PITTSBURGH HCS: Highland Drive	PCT	53	94%	6%	2%	51%
4	PITTSBURGH HCS: Highland Drive	SUPT	28	86%	7%	4%	57%
5	MARYLAND HCS: Baltimore	PCT	141	69%	8%	2%	60%
5	MARYLAND HCS: Perry Point	PCT	143	73%	5%	1%	38%
5	WASHINGTON DC	PCT	280	93%	17%	2%	53%
6	ASHEVILLE	PCT	39	95%	3%	3%	97%
6	DURHAM	PCT	172	76%	0%	1%	46%
6	FAYETTEVILLE NC	PCT	75	93%	11%	0%	79%
6	HAMPTON	PCT	172	77%	2%	3%	51%
6	SALISBURY	PCT	137	93%	10%	3%	58%
7	ATLANTA	PCT	83	89%	6%	0%	66%
7	AUGUSTA	PCT	87	80%	8%	0%	56%
7	BIRMINGHAM	PCT	70	84%	3%	3%	56%
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	160	88%	11%	0%	66%
7	CHARLESTON	PCT	131	80%	4%	2%	51%
7	DUBLIN	PCT	139	91%	8%	1%	63%
8	BAY PINES	PCT	273	86%	7%	2%	65%
8	MIAMI	PCT	56	88%	4%	2%	70%
8	NO.FL/SO.GA VETERANS HCS: Gainesville	PCT	174	73%	11%	1%	56%
8	SAN JUAN	PCT	38	92%	26%	3%	74%
8	TAMPA	PCT	37	86%	0%	19%	68%
9	HUNTINGTON	PCT	172	90%	0%	2%	76%
9	LEXINGTON	PCT	25	96%	0%	4%	48%
9	LOUISVILLE	PCT	54	91%	11%	0%	63%
9	MEMPHIS	PCT	136	96%	2%	4%	66%
9	MOUNTAIN HOME	PCT	126	90%	10%	2%	59%
10	BRECKSVILLE	PCT	169	93%	12%	2%	46%
10	BRECKSVILLE	WSDTT	16	6%	0%	0%	69%
10	CHILLICOTHE	PCT	93	92%	0%	0%	46%
10	CINCINNATI	PCT	104	72%	6%	3%	40%
10	COLUMBUS	PCT	114	95%	0%	0%	53%
10	DAYTON	PCT	82	89%	13%	4%	67%
11	ANN ARBOR HCS	PCT	107	75%	9%	4%	46%
11	BATTLE CREEK	PCT	47	98%	6%	2%	55%
11	DANVILLE	PCT	77	90%	1%	4%	58%
11	NORTHERN IN HCS: Fort Wayne	PCT	21	95%	0%	5%	57%
11	NORTHERN IN HCS: Marion	PCT	29	72%	14%	3%	31%

Table 2-15. Traumatic Exposure and Service Connection Among Veterans in Specialized Outpatient PTSD Programs: FY 2003.

VISN	FACILITY	PROGRAM	N	Exposed to Enemy/ Friendly Fire	Participated In Atrocities	Prisoner of War	Service Connected
12	CHICAGO HCS: West Side	PCT	132	88%	3%	1%	61%
12	HINES	PCT	58	93%	21%	0%	64%
12	MADISON	WSDTT	36	6%	0%	0%	64%
15	EASTERN KS HCS: Topeka	PCT	76	92%	9%	1%	53%
15	KANSAS CITY	PCT	254	86%	5%	1%	50%
15	POPLAR BLUFF	PCT	43	95%	14%	5%	77%
15	ST. LOUIS	PCT	171	94%	23%	2%	74%
15	WICHITA	PCT	60	83%	3%	2%	50%
16	CENTRAL AR VETERANS HCS: No. Little Rock	PCT	184	91%	5%	2%	66%
16	FAYETTEVILLE AR	PCT	145	81%	1%	2%	58%
16	GULF COAST VETERANS HCS: Biloxi	PCT	200	91%	15%	2%	68%
16	HOUSTON	PCT	219	87%	6%	1%	58%
16	JACKSON	PCT	48	96%	10%	2%	81%
16	NEW ORLEANS	PCT	356	88%	5%	0%	45%
16	NEW ORLEANS	WSDTT	38	11%	0%	0%	68%
16	OKLAHOMA CITY	PCT	43	79%	5%	5%	58%
17	CENTRAL TX VETERANS HCS: Austin	PCT	226	81%	0%	2%	62%
17	CENTRAL TX VETERANS HCS: Temple	PCT	265	80%	7%	3%	72%
17	CENTRAL TX VETERANS HCS: Waco	PCT	101	92%	11%	2%	64%
17	NORTH TX HCS: Dallas	PCT	203	87%	0%	0%	61%
17	SOUTH TX VETERANS HCS: San Antonio	PCT	298	84%	8%	0%	73%
18	EL PASO VETERANS HCS	PCT	95	91%	14%	0%	85%
18	NEW MEXICO HCS: Albuquerque	PCT	270	73%	10%	2%	64%
18	PHOENIX	PCT	148	90%	0%	1%	55%
18	SOUTHERN AZ HCS: Tucson	PCT	157	79%	8%	8%	59%
19	CHEYENNE	PCT	49	78%	10%	2%	78%
19	GRAND JUNCTION	PCT	422	77%	8%	2%	78%
19	SALT LAKE CITY HCS	PCT	64	86%	8%	0%	48%
19	SOUTHERN CO HCS: Pueblo	PCT	57	91%	7%	4%	60%
20	BOISE	PCT	70	79%	9%	0%	69%
20	PORTLAND	PCT	337	59%	8%	0%	62%
20	PUGET SOUND HCS: American Lake	PCT	238	76%	6%	2%	73%
20	PUGET SOUND HCS: Seattle	PCT	175	80%	2%	1%	61%
20	SPOKANE	PCT	146	82%	3%	7%	77%
21	HONOLULU	PCT	35	91%	3%	0%	83%
21	NORTHERN CA HCS	PCT	117	97%	17%	2%	75%
21	PALO ALTO HCS: San Jose	PCT	60	80%	3%	2%	27%
21	SAN FRANCISCO	PCT	77	83%	6%	3%	66%
21	SAN FRANCISCO	SUPT	45	80%	11%	0%	40%
22	GREATER LOS ANGELES HCS: East LA	PCT	78	86%	17%	0%	59%
22	GREATER LOS ANGELES HCS: West LA	PCT	109	86%	6%	1%	34%
22	LOMA LINDA	PCT	45	93%	20%	0%	76%
22	LOMA LINDA	WSDTT	33	9%	0%	0%	64%
22	SAN DIEGO HCS CA	PCT	247	87%	10%	4%	65%
22	SOUTHERN NV HCS: Las Vegas	PCT	152	93%	3%	2%	57%
23	BLACK HILLS HCS: Fort Meade	SUPT	176	43%	3%	0%	53%
23	CENTRAL IA HCS: Knoxville	PCT	25	92%	8%	4%	60%
23	IOWA CITY	PCT	219	75%	4%	1%	55%
23	MINNEAPOLIS	PCT	121	74%	9%	0%	67%
23	NEBRASKA-WESTERN IA HCS: Lincoln	PCT	91	86%	0%	1%	68%
23	NEBRASKA-WESTERN IA HCS: Omaha	PCT	88	77%	13%	1%	78%
23	SIOUX FALLS	PCT	13	85%	0%	0%	46%
TOTAL			12,585				
MEAN			117	81%	6%	2%	61%
S.D.			82	19%	6%	2%	13%

Table 2-16. Psychotropic Medication and Psychiatric Comorbidities Among Veterans in Specialized Outpatient PTSD Programs, by VISN: FY 2003.

VISN	N	Psychotropic Medication	Axis I Nonpsychotic Disorder	Axis I Psychotic Disorder	Axis II Disorder
1	590	55%	59%	10%	8%
2	266	82%	37%	7%	6%
3	596	43%	35%	5%	7%
4	239	72%	31%	5%	5%
5	564	64%	56%	7%	12%
6	595	68%	36%	4%	3%
7	670	78%	33%	7%	3%
8	578	66%	37%	6%	10%
9	513	85%	48%	4%	4%
10	578	51%	32%	6%	5%
11	281	65%	52%	8%	7%
12	226	52%	39%	8%	19%
15	604	66%	39%	6%	8%
16	1,233	66%	58%	7%	7%
17	1,093	72%	45%	6%	4%
18	670	66%	38%	4%	9%
19	592	82%	76%	13%	31%
20	966	69%	54%	11%	13%
21	334	48%	48%	6%	10%
22	664	65%	39%	7%	3%
23	733	52%	51%	4%	11%
TOTAL	12,585				
MEAN	599	65%	45%	7%	9%
S.D	267	12%	11%	2%	6%

Table 2-17. Psychotropic Medication and Psychiatric Comorbidities Among Veterans in Specialized Outpatient PTSD Programs: FY 2003.

VISN	FACILITY	PROGRAM	N	Psychotropic Medication	Axis I Nonpsychotic Disorder	Axis I Psychotic Disorder	Axis II Personality Disorder
1	BOSTON HCS: Boston	PCT	100	56%	70%	9%	9%
1	BOSTON HCS: Boston	WSDTT	65	55%	100%	13%	11%
1	BOSTON HCS: Brockton	PCT	61	62%	11%	16%	10%
1	BOSTON HCS: Brockton	SUPT	2	50%	0%	0%	0%
1	CONNECTICUT HCS: West Haven	PCT	124	43%	53%	8%	8%
1	CONNECTICUT HCS: West Haven	SUPT	58	61%	52%	21%	9%
1	MANCHESTER	PCT	36	51%	81%	8%	3%
1	PROVIDENCE	PCT	77	44%	61%	6%	3%
1	WHITE RIVER JUNCTION	PCT	67	80%	61%	9%	10%
2	CANANDAIGUA	PCT	89	81%	51%	9%	10%
2	SYRACUSE	PCT	91	76%	28%	5%	3%
2	WESTERN NY HCS: Batavia	PCT	86	88%	33%	7%	5%
3	BRONX	PCT	46	27%	22%	4%	11%
3	HUDSON VALLEY HCS: Castle Point	PCT	24	75%	93%	0%	0%
3	NEW JERSEY HCS: East Orange	PCT	187	46%	23%	4%	9%
3	NEW YORK HARBOR HCS: Brooklyn	PCT	215	34%	31%	3%	5%
3	NEW YORK HARBOR HCS: New York	PCT	124	54%	44%	11%	10%
4	COATESVILLE	PCT	92	79%	26%	3%	4%
4	PHILADELPHIA	PCT	66	87%	35%	13%	6%
4	PITTSBURGH HCS: Highland Drive	PCT	53	45%	27%	0%	6%
4	PITTSBURGH HCS: Highland Drive	SUPT	28	64%	43%	4%	0%
5	MARYLAND HCS: Baltimore	PCT	141	62%	56%	8%	7%
5	MARYLAND HCS: Perry Point	PCT	143	83%	26%	7%	33%
5	WASHINGTON DC	PCT	280	54%	71%	6%	3%
6	ASHEVILLE	PCT	39	92%	0%	3%	0%
6	DURHAM	PCT	172	57%	69%	5%	1%
6	FAYETTEVILLE NC	PCT	75	93%	40%	0%	0%
6	HAMPTON	PCT	172	60%	22%	4%	5%
6	SALISBURY	PCT	137	70%	20%	6%	4%
7	ATLANTA	PCT	83	68%	9%	1%	2%
7	AUGUSTA	PCT	87	63%	72%	1%	3%
7	BIRMINGHAM	PCT	70	80%	37%	4%	3%
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	160	87%	9%	11%	1%
7	CHARLESTON	PCT	131	59%	69%	9%	7%
7	DUBLIN	PCT	139	97%	21%	9%	3%
8	BAY PINES	PCT	273	66%	31%	5%	6%
8	MIAMI	PCT	56	67%	30%	3%	2%
8	NO.FL/SO.GA VETERANS HCS: Gainesville	PCT	174	68%	48%	8%	21%
8	SAN JUAN	PCT	38	84%	24%	8%	3%
8	TAMPA	PCT	37	41%	43%	3%	8%
9	HUNTINGTON	PCT	172	95%	22%	4%	0%
9	LEXINGTON	PCT	25	63%	8%	0%	8%
9	LOUISVILLE	PCT	54	96%	0%	0%	0%
9	MEMPHIS	PCT	136	75%	74%	6%	3%
9	MOUNTAIN HOME	PCT	126	82%	84%	3%	13%
10	BRECKSVILLE	PCT	169	56%	32%	5%	7%
10	BRECKSVILLE	WSDTT	16	50%	44%	13%	44%
10	CHILLICOTHE	PCT	93	34%	0%	2%	0%
10	CINCINNATI	PCT	104	39%	57%	10%	8%
10	COLUMBUS	PCT	114	53%	8%	2%	0%
10	DAYTON	PCT	82	70%	70%	15%	5%
11	ANN ARBOR HCS	PCT	107	65%	69%	9%	11%
11	BATTLE CREEK	PCT	47	51%	17%	9%	9%
11	DANVILLE	PCT	77	65%	69%	4%	4%
11	NORTHERN IN HCS: Fort Wayne	PCT	21	71%	14%	5%	0%
11	NORTHERN IN HCS: Marion	PCT	29	83%	32%	14%	3%

Table 2-17. Psychotropic Medication and Psychiatric Comorbidities Among Veterans in Specialized Outpatient PTSD Programs: FY 2003.

VISN	FACILITY	PROGRAM	N	Psychotropic Medication	Axis I Nonpsychotic Disorder	Axis I Psychotic Disorder	Axis II Personality Disorder
12	CHICAGO HCS: West Side	PCT	132	42%	33%	9%	2%
12	HINES	PCT	58	62%	21%	0%	69%
12	MADISON	WSDTT	36	76%	94%	14%	3%
15	EASTERN KS HCS: Topeka	PCT	76	81%	41%	17%	11%
15	KANSAS CITY	PCT	254	62%	56%	6%	7%
15	POPLAR BLUFF	PCT	43	93%	40%	0%	5%
15	ST. LOUIS	PCT	171	64%	4%	1%	2%
15	WICHITA	PCT	60	52%	62%	5%	22%
16	CENTRAL AR VETERANS HCS: No. Little Rock	PCT	184	73%	35%	5%	11%
16	FAYETTEVILLE AR	PCT	145	75%	46%	6%	8%
16	GULF COAST VETERANS HCS: Biloxi	PCT	200	76%	69%	17%	7%
16	HOUSTON	PCT	219	69%	74%	3%	14%
16	JACKSON	PCT	48	83%	27%	4%	4%
16	NEW ORLEANS	PCT	356	50%	61%	7%	3%
16	NEW ORLEANS	WSDTT	38	66%	84%	8%	3%
16	OKLAHOMA CITY	PCT	43	61%	14%	0%	0%
17	CENTRAL TX VETERANS HCS: Austin	PCT	226	65%	31%	7%	3%
17	CENTRAL TX VETERANS HCS: Temple	PCT	265	68%	47%	7%	7%
17	CENTRAL TX VETERANS HCS: Waco	PCT	101	71%	27%	6%	11%
17	NORTH TX HCS: Dallas	PCT	203	90%	65%	4%	0%
17	SOUTH TX VETERANS HCS: San Antonio	PCT	298	67%	47%	5%	3%
18	EL PASO VETERANS HCS	PCT	95	45%	49%	6%	13%
18	NEW MEXICO HCS: Albuquerque	PCT	270	71%	41%	3%	16%
18	PHOENIX	PCT	148	79%	74%	9%	3%
18	SOUTHERN AZ HCS: Tucson	PCT	157	60%	5%	1%	0%
19	CHEYENNE	PCT	49	90%	31%	8%	14%
19	GRAND JUNCTION	PCT	422	88%	98%	15%	41%
19	SALT LAKE CITY HCS	PCT	64	56%	26%	6%	0%
19	SOUTHERN CO HCS: Pueblo	PCT	57	59%	2%	5%	2%
20	BOISE	PCT	70	76%	36%	24%	20%
20	PORTLAND	PCT	337	77%	58%	17%	18%
20	PUGET SOUND HCS: American Lake	PCT	238	61%	35%	7%	6%
20	PUGET SOUND HCS: Seattle	PCT	175	59%	67%	9%	6%
20	SPOKANE	PCT	146	74%	70%	4%	20%
21	HONOLULU	PCT	35	37%	34%	3%	6%
21	NORTHERN CA HCS	PCT	117	56%	79%	9%	6%
21	PALO ALTO HCS: San Jose	PCT	60	37%	33%	2%	13%
21	SAN FRANCISCO	PCT	77	45%	35%	5%	3%
21	SAN FRANCISCO	SUPT	45	53%	14%	5%	29%
22	GREATER LOS ANGELES HCS: East LA	PCT	78	45%	88%	5%	8%
22	GREATER LOS ANGELES HCS: West LA	PCT	109	59%	40%	12%	1%
22	LOMA LINDA	PCT	45	82%	45%	0%	0%
22	LOMA LINDA	WSDTT	33	85%	88%	33%	12%
22	SAN DIEGO HCS CA	PCT	247	61%	38%	7%	3%
22	SOUTHERN NV HCS: Las Vegas	PCT	152	79%	3%	1%	1%
23	BLACK HILLS HCS: Fort Meade	SUPT	176	23%	16%	2%	3%
23	CENTRAL IA HCS: Knoxville	PCT	25	96%	32%	8%	16%
23	IOWA CITY	PCT	219	66%	47%	6%	8%
23	MINNEAPOLIS	PCT	121	52%	70%	5%	9%
23	NEBRASKA-WESTERN IA HCS: Lincoln	PCT	91	49%	89%	1%	4%
23	NEBRASKA-WESTERN IA HCS: Omaha	PCT	88	68%	69%	6%	41%
23	SIOUX FALLS	PCT	13	33%	46%	0%	8%
TOTAL			12,585				
MEAN			117	65%	43%	7%	8%
S.D.			82	17%	25%	5%	10%

Table 2-18. Referral Sources Among Veterans in Specialized Outpatient PTSD Programs, by VISN: FY 2003.

VISN	N	VAMC Program	RCS Vet Center	Self-Referred	Other Referral
1	590	73%	8%	12%	6%
2	266	87%	2%	8%	4%
3	596	77%	4%	17%	2%
4	239	74%	9%	14%	3%
5	564	88%	2%	7%	1%
6	595	80%	8%	8%	4%
7	670	82%	11%	5%	1%
8	578	90%	4%	4%	1%
9	513	69%	7%	18%	2%
10	578	79%	4%	12%	5%
11	281	69%	2%	22%	7%
12	226	72%	2%	21%	6%
15	604	77%	8%	11%	2%
16	1,233	86%	5%	8%	1%
17	1,093	97%	1%	1%	1%
18	670	88%	2%	7%	2%
19	592	59%	1%	39%	1%
20	966	82%	6%	7%	2%
21	334	60%	5%	29%	5%
22	664	76%	8%	11%	3%
23	733	67%	2%	8%	23%
TOTAL	12,585				
MEAN	599	78%	5%	13%	4%
S.D	262	10%	3%	9%	5%

Table 2-19. Referral Sources Among Veterans in Specialized Outpatient PTSD Programs: FY 2003.

VISN	FACILITY	PROGRAM	N	VAMC Program	RCS Vet Center	Self-Referred	Other Referral
1	BOSTON HCS: Boston	PCT	100	70%	16%	11%	3%
1	BOSTON HCS: Boston	WSDTT	65	80%	2%	15%	3%
1	BOSTON HCS: Brockton	PCT	61	56%	3%	2%	39%
1	BOSTON HCS: Brockton	SUPT	2	100%	0%	0%	0%
1	CONNECTICUT HCS: West Haven	PCT	124	62%	15%	19%	2%
1	CONNECTICUT HCS: West Haven	SUPT	58	66%	12%	21%	0%
1	MANCHESTER	PCT	36	89%	0%	11%	0%
1	PROVIDENCE	PCT	77	88%	1%	8%	3%
1	WHITE RIVER JUNCTION	PCT	67	87%	3%	7%	3%
2	CANANDAIGUA	PCT	89	84%	0%	10%	6%
2	SYRACUSE	PCT	91	95%	2%	2%	1%
2	WESTERN NY HCS: Batavia	PCT	86	81%	2%	10%	6%
3	BRONX	PCT	46	83%	9%	7%	2%
3	HUDSON VALLEY HCS: Castle Point	PCT	24	71%	0%	29%	0%
3	NEW JERSEY HCS: East Orange	PCT	187	94%	0%	5%	0%
3	NEW YORK HARBOR HCS: Brooklyn	PCT	215	62%	7%	27%	3%
3	NEW YORK HARBOR HCS: New York	PCT	124	77%	2%	18%	3%
4	COATESVILLE	PCT	92	87%	1%	8%	2%
4	PHILADELPHIA	PCT	66	83%	5%	12%	0%
4	PITTSBURGH HCS: Highland Drive	PCT	53	32%	32%	26%	8%
4	PITTSBURGH HCS: Highland Drive	SUPT	28	86%	0%	14%	0%
5	MARYLAND HCS: Baltimore	PCT	141	77%	1%	17%	4%
5	MARYLAND HCS: Perry Point	PCT	143	86%	5%	8%	0%
5	WASHINGTON DC	PCT	280	96%	2%	1%	1%
6	ASHEVILLE	PCT	39	100%	0%	0%	0%
6	DURHAM	PCT	172	58%	16%	21%	5%
6	FAYETTEVILLE NC	PCT	75	89%	4%	1%	5%
6	HAMPTON	PCT	172	84%	6%	6%	4%
6	SALISBURY	PCT	137	94%	3%	1%	1%
7	ATLANTA	PCT	83	98%	0%	1%	0%
7	AUGUSTA	PCT	87	70%	9%	15%	6%
7	BIRMINGHAM	PCT	70	86%	1%	13%	0%
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	160	94%	1%	4%	1%
7	CHARLESTON	PCT	131	89%	9%	0%	1%
7	DUBLIN	PCT	139	59%	38%	2%	1%
8	BAY PINES	PCT	273	85%	8%	5%	1%
8	MIAMI	PCT	56	98%	0%	0%	0%
8	NO.FL/SO.GA VETERANS HCS: Gainesville	PCT	174	97%	0%	1%	2%
8	SAN JUAN	PCT	38	97%	3%	0%	0%
8	TAMPA	PCT	37	73%	8%	14%	5%
9	HUNTINGTON	PCT	172	24%	11%	51%	2%
9	LEXINGTON	PCT	25	96%	0%	4%	0%
9	LOUISVILLE	PCT	54	98%	0%	2%	0%
9	MEMPHIS	PCT	136	85%	12%	1%	2%
9	MOUNTAIN HOME	PCT	126	96%	2%	0%	2%
10	BRECKSVILLE	PCT	169	78%	3%	17%	2%
10	BRECKSVILLE	WSDTT	16	81%	0%	19%	0%
10	CHILLICOTHE	PCT	93	78%	0%	0%	22%
10	CINCINNATI	PCT	104	68%	4%	23%	5%
10	COLUMBUS	PCT	114	82%	11%	5%	0%
10	DAYTON	PCT	82	88%	2%	7%	0%
11	ANN ARBOR HCS	PCT	107	71%	2%	26%	1%
11	BATTLE CREEK	PCT	47	55%	2%	32%	11%
11	DANVILLE	PCT	77	62%	3%	18%	17%
11	NORTHERN IN HCS: Fort Wayne	PCT	21	95%	0%	5%	0%
11	NORTHERN IN HCS: Marion	PCT	29	83%	0%	10%	7%

Table 2-19. Referral Sources Among Veterans in Specialized Outpatient PTSD Programs: FY 2003.

VISN	FACILITY	PROGRAM	N	VAMC Program	RCS Vet Center	Self-Referred	Other Referral
12	CHICAGO HCS: West Side	PCT	132	70%	1%	29%	1%
12	HINES	PCT	58	64%	3%	14%	19%
12	MADISON	WSDTT	36	92%	3%	3%	3%
15	EASTERN KS HCS: Topeka	PCT	76	97%	0%	3%	0%
15	KANSAS CITY	PCT	254	66%	15%	14%	5%
15	POPLAR BLUFF	PCT	43	98%	0%	2%	0%
15	ST. LOUIS	PCT	171	89%	6%	3%	0%
15	WICHITA	PCT	60	50%	3%	42%	3%
16	CENTRAL AR VETERANS HCS: No. Little Rock	PCT	184	89%	9%	1%	1%
16	FAYETTEVILLE AR	PCT	145	97%	1%	1%	0%
16	GULF COAST VETERANS HCS: Biloxi	PCT	200	75%	14%	8%	4%
16	HOUSTON	PCT	219	81%	1%	18%	0%
16	JACKSON	PCT	48	83%	4%	10%	2%
16	NEW ORLEANS	PCT	356	93%	2%	4%	0%
16	NEW ORLEANS	WSDTT	38	76%	0%	11%	8%
16	OKLAHOMA CITY	PCT	43	56%	0%	42%	2%
17	CENTRAL TX VETERANS HCS: Austin	PCT	226	96%	2%	2%	0%
17	CENTRAL TX VETERANS HCS: Temple	PCT	265	100%	0%	0%	0%
17	CENTRAL TX VETERANS HCS: Waco	PCT	101	100%	0%	0%	0%
17	NORTH TX HCS: Dallas	PCT	203	96%	0%	2%	2%
17	SOUTH TX VETERANS HCS: San Antonio	PCT	298	95%	2%	2%	1%
18	EL PASO VETERANS HCS	PCT	95	73%	3%	23%	1%
18	NEW MEXICO HCS: Albuquerque	PCT	270	93%	4%	1%	2%
18	PHOENIX	PCT	148	84%	1%	14%	1%
18	SOUTHERN AZ HCS: Tucson	PCT	157	94%	1%	3%	3%
19	CHEYENNE	PCT	49	76%	0%	22%	2%
19	GRAND JUNCTION	PCT	422	54%	0%	45%	0%
19	SALT LAKE CITY HCS	PCT	64	59%	5%	31%	5%
19	SOUTHERN CO HCS: Pueblo	PCT	57	79%	2%	12%	4%
20	BOISE	PCT	70	100%	0%	0%	0%
20	PORTLAND	PCT	337	66%	14%	8%	1%
20	PUGET SOUND HCS: American Lake	PCT	238	93%	2%	4%	1%
20	PUGET SOUND HCS: Seattle	PCT	175	94%	2%	1%	3%
20	SPOKANE	PCT	146	77%	2%	18%	2%
21	HONOLULU	PCT	35	86%	0%	11%	3%
21	NORTHERN CA HCS	PCT	117	59%	1%	37%	3%
21	PALO ALTO HCS: San Jose	PCT	60	80%	5%	10%	5%
21	SAN FRANCISCO	PCT	77	42%	13%	39%	5%
21	SAN FRANCISCO	SUPT	45	51%	9%	29%	11%
22	GREATER LOS ANGELES HCS: East LA	PCT	78	33%	17%	36%	14%
22	GREATER LOS ANGELES HCS: West LA	PCT	109	75%	1%	23%	1%
22	LOMA LINDA	PCT	45	84%	0%	4%	0%
22	LOMA LINDA	WSDTT	33	76%	3%	15%	6%
22	SAN DIEGO HCS CA	PCT	247	81%	14%	1%	3%
22	SOUTHERN NV HCS: Las Vegas	PCT	152	89%	3%	5%	1%
23	BLACK HILLS HCS: Fort Meade	SUPT	176	22%	0%	5%	74%
23	CENTRAL IA HCS: Knoxville	PCT	25	72%	4%	20%	4%
23	IOWA CITY	PCT	219	77%	3%	6%	14%
23	MINNEAPOLIS	PCT	121	80%	3%	13%	3%
23	NEBRASKA-WESTERN IA HCS: Lincoln	PCT	91	91%	2%	7%	0%
23	NEBRASKA-WESTERN IA HCS: Omaha	PCT	88	88%	5%	7%	1%
23	SIOUX FALLS	PCT	13	77%	0%	15%	8%
TOTAL			12,585				
MEAN			117	79%	4%	12%	4%
S.D.			82	17%	6%	12%	9%

Table 2-20. Medical Status, Incarceration, Sexual and Noncombat Trauma
Among Veterans in Specialized Outpatient PTSD Programs, by VISN: FY 2003.

VISN	N	Chronic Medical Problem (Current)	Incarcerated >2 Weeks (Lifetime)	PTSD Due to Sexual Trauma	PTSD Due to Noncombat Nonsexual Trauma
1	590	78%	11%	16%	20%
2	266	72%	12%	9%	12%
3	596	78%	10%	2%	9%
4	239	76%	7%	26%	20%
5	564	87%	15%	6%	21%
6	595	81%	17%	3%	17%
7	670	85%	17%	5%	9%
8	578	75%	13%	5%	4%
9	513	83%	11%	5%	3%
10	578	85%	12%	23%	24%
11	281	83%	17%	5%	10%
12	226	82%	14%	17%	12%
15	604	82%	15%	3%	6%
16	1,233	79%	16%	5%	7%
17	1,093	82%	19%	5%	9%
18	670	76%	9%	8%	12%
19	592	90%	15%	3%	3%
20	966	78%	14%	9%	14%
21	334	72%	15%	7%	8%
22	664	81%	22%	8%	15%
23	733	74%	11%	8%	12%
TOTAL	12,585				
MEAN	599	80%	14%	8%	12%
S.D	262	5%	4%	7%	6%

Table 2-21. Medical Status, Incarceration, Sexual and Noncombat Trauma Among Veterans in Specialized Outpatient PTSD Programs: FY 2003.

VISN	FACILITY	PROGRAM	N	Chronic Medical Problem (Current)	Incarcerated >2 Weeks (Lifetime)	PTSD Due to Sexual Trauma	PTSD Due to Noncombat Nonsexual Trauma
1	BOSTON HCS: Boston	PCT	100	74%	16%	6%	20%
1	BOSTON HCS: Boston	WSDTT	65	83%	2%	62%	51%
1	BOSTON HCS: Brockton	PCT	61	84%	15%	3%	8%
1	BOSTON HCS: Brockton	SUPT	2	100%	0%	0%	0%
1	CONNECTICUT HCS: West Haven	PCT	124	72%	8%	8%	6%
1	CONNECTICUT HCS: West Haven	SUPT	58	75%	31%	2%	11%
1	MANCHESTER	PCT	36	69%	3%	6%	17%
1	PROVIDENCE	PCT	77	87%	10%	5%	18%
1	WHITE RIVER JUNCTION	PCT	67	79%	1%	40%	42%
2	CANANDAIGUA	PCT	89	65%	20%	10%	20%
2	SYRACUSE	PCT	91	73%	10%	13%	13%
2	WESTERN NY HCS: Batavia	PCT	86	78%	7%	3%	2%
3	BRONX	PCT	46	80%	4%	0%	7%
3	HUDSON VALLEY HCS: Castle Point	PCT	24	92%	21%	4%	38%
3	NEW JERSEY HCS: East Orange	PCT	187	74%	9%	2%	4%
3	NEW YORK HARBOR HCS: Brooklyn	PCT	215	82%	9%	1%	6%
3	NEW YORK HARBOR HCS: New York	PCT	124	72%	15%	2%	15%
4	COATESVILLE	PCT	92	83%	9%	47%	43%
4	PHILADELPHIA	PCT	66	74%	3%	27%	11%
4	PITTSBURGH HCS: Highland Drive	PCT	53	68%	4%	0%	0%
4	PITTSBURGH HCS: Highland Drive	SUPT	28	73%	14%	0%	7%
5	MARYLAND HCS: Baltimore	PCT	141	78%	20%	11%	44%
5	MARYLAND HCS: Perry Point	PCT	143	80%	10%	8%	30%
5	WASHINGTON DC	PCT	280	94%	14%	1%	5%
6	ASHEVILLE	PCT	39	79%	5%	3%	3%
6	DURHAM	PCT	172	73%	23%	4%	40%
6	FAYETTEVILLE NC	PCT	75	93%	12%	1%	0%
6	HAMPTON	PCT	172	84%	16%	3%	14%
6	SALISBURY	PCT	137	81%	17%	4%	6%
7	ATLANTA	PCT	83	89%	27%	1%	6%
7	AUGUSTA	PCT	87	69%	11%	10%	10%
7	BIRMINGHAM	PCT	70	97%	17%	6%	6%
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	160	75%	16%	4%	15%
7	CHARLESTON	PCT	131	90%	14%	5%	8%
7	DUBLIN	PCT	139	92%	18%	6%	4%
8	BAY PINES	PCT	273	80%	15%	3%	3%
8	MIAMI	PCT	56	83%	20%	2%	2%
8	NO.FL/SO.GA VETERANS HCS: Gainesville	PCT	174	72%	13%	9%	7%
8	SAN JUAN	PCT	38	84%	3%	3%	3%
8	TAMPA	PCT	37	30%	3%	5%	3%
9	HUNTINGTON	PCT	172	82%	3%	4%	1%
9	LEXINGTON	PCT	25	88%	4%	4%	4%
9	LOUISVILLE	PCT	54	50%	19%	4%	0%
9	MEMPHIS	PCT	136	82%	18%	4%	2%
9	MOUNTAIN HOME	PCT	126	98%	12%	8%	6%
10	BRECKSVILLE	PCT	169	83%	18%	2%	4%
10	BRECKSVILLE	WSDTT	16	44%	6%	75%	44%
10	CHILLICOTHE	PCT	93	95%	0%	0%	8%
10	CINCINNATI	PCT	104	77%	14%	14%	8%
10	COLUMBUS	PCT	114	91%	6%	90%	88%
10	DAYTON	PCT	82	85%	21%	6%	10%
11	ANN ARBOR HCS	PCT	107	89%	20%	6%	17%
11	BATTLE CREEK	PCT	47	85%	28%	0%	0%
11	DANVILLE	PCT	77	79%	9%	3%	6%
11	NORTHERN IN HCS: Fort Wayne	PCT	21	65%	24%	5%	5%
11	NORTHERN IN HCS: Marion	PCT	29	83%	10%	14%	10%

Table 2-21. Medical Status, Incarceration, Sexual and Noncombat Trauma Among Veterans in Specialized Outpatient PTSD Programs: FY 2003.

VISN	FACILITY	PROGRAM	N	Chronic Medical Problem (Current)	Incarcerated >2 Weeks (Lifetime)	PTSD Due to Sexual Trauma	PTSD Due to Noncombat Nonsexual Trauma
12	CHICAGO HCS: West Side	PCT	132	86%	20%	4%	8%
12	HINES	PCT	58	78%	10%	3%	0%
12	MADISON	WSDTT	36	71%	0%	91%	43%
15	EASTERN KS HCS: Topeka	PCT	76	70%	20%	1%	4%
15	KANSAS CITY	PCT	254	91%	16%	4%	11%
15	POPLAR BLUFF	PCT	43	79%	5%	0%	0%
15	ST. LOUIS	PCT	171	80%	11%	1%	2%
15	WICHITA	PCT	60	65%	25%	7%	0%
16	CENTRAL AR VETERANS HCS: No. Little Rock	PCT	184	78%	23%	4%	8%
16	FAYETTEVILLE AR	PCT	145	82%	7%	2%	5%
16	GULF COAST VETERANS HCS: Biloxi	PCT	200	75%	16%	4%	6%
16	HOUSTON	PCT	219	80%	19%	3%	5%
16	JACKSON	PCT	48	75%	8%	4%	4%
16	NEW ORLEANS	PCT	356	82%	17%	3%	6%
16	NEW ORLEANS	WSDTT	38	76%	0%	64%	42%
16	OKLAHOMA CITY	PCT	43	79%	26%	2%	5%
17	CENTRAL TX VETERANS HCS: Austin	PCT	226	80%	19%	4%	8%
17	CENTRAL TX VETERANS HCS: Temple	PCT	265	82%	27%	8%	7%
17	CENTRAL TX VETERANS HCS: Waco	PCT	101	68%	22%	5%	29%
17	NORTH TX HCS: Dallas	PCT	203	85%	18%	2%	5%
17	SOUTH TX VETERANS HCS: San Antonio	PCT	298	87%	11%	4%	9%
18	EL PASO VETERANS HCS	PCT	95	84%	8%	11%	9%
18	NEW MEXICO HCS: Albuquerque	PCT	270	78%	7%	12%	13%
18	PHOENIX	PCT	148	90%	11%	0%	1%
18	SOUTHERN AZ HCS: Tucson	PCT	157	60%	11%	9%	24%
19	CHEYENNE	PCT	49	80%	12%	12%	12%
19	GRAND JUNCTION	PCT	422	96%	16%	2%	1%
19	SALT LAKE CITY HCS	PCT	64	69%	13%	3%	6%
19	SOUTHERN CO HCS: Pueblo	PCT	57	86%	12%	0%	0%
20	BOISE	PCT	70	79%	9%	1%	1%
20	PORTLAND	PCT	337	68%	16%	11%	16%
20	PUGET SOUND HCS: American Lake	PCT	238	81%	11%	11%	18%
20	PUGET SOUND HCS: Seattle	PCT	175	83%	14%	6%	19%
20	SPOKANE	PCT	146	90%	16%	11%	4%
21	HONOLULU	PCT	35	71%	9%	0%	3%
21	NORTHERN CA HCS	PCT	117	82%	15%	0%	1%
21	PALO ALTO HCS: San Jose	PCT	60	58%	10%	10%	10%
21	SAN FRANCISCO	PCT	77	71%	1%	15%	9%
21	SAN FRANCISCO	SUPT	45	68%	51%	11%	23%
22	GREATER LOS ANGELES HCS: East LA	PCT	78	81%	22%	12%	3%
22	GREATER LOS ANGELES HCS: West LA	PCT	109	82%	44%	4%	35%
22	LOMA LINDA	PCT	45	78%	24%	4%	11%
22	LOMA LINDA	WSDTT	33	67%	3%	70%	52%
22	SAN DIEGO HCS CA	PCT	247	81%	22%	6%	14%
22	SOUTHERN NV HCS: Las Vegas	PCT	152	86%	10%	2%	2%
23	BLACK HILLS HCS: Fort Meade	SUPT	176	61%	9%	2%	2%
23	CENTRAL IA HCS: Knoxville	PCT	25	60%	12%	0%	8%
23	IOWA CITY	PCT	219	82%	10%	13%	15%
23	MINNEAPOLIS	PCT	121	73%	12%	7%	12%
23	NEBRASKA-WESTERN IA HCS: Lincoln	PCT	91	76%	3%	3%	12%
23	NEBRASKA-WESTERN IA HCS: Omaha	PCT	88	86%	19%	15%	29%
23	SIOUX FALLS	PCT	13	83%	15%	15%	0%
TOTAL			12,585				
MEAN			117	78%	14%	10%	12%
S.D.			82	11%	9%	18%	15%

PART III: PROGRAMMATIC CAPACITY

Part III presents tables for the workload, staffing and costs for FY 2003 of both the Specialized Outpatient PTSD Programs (SOPPs) and the Specialized Intensive PTSD Programs (SIPPs). In addition, the changes from FY 1996, FY 1997, and FY 1998 are presented for selected variables. Tracking of changes in administrative operation annually permits an examination of the shifting of programmatic capacity due to the reallocation of resources and/or the restructuring of clinical services. The data are presented at the VISN and individual program levels for the SOPPs, and at the VISN and facility levels for the SIPPs. Because programmatic changes continue to take place for a large number of SIPPs, it is difficult to present representative data for individual SIPPs over time. For this reason, we have shifted our approach to presenting aggregated data representing all SIPPs at a facility for workload, staffing, and costs.

Specialized PTSD Programs

Program types comprising the SOPPs are the PTSD Clinical Team (PCT), the Substance Use and PTSD Team (SUPT) and the Women's Stress Disorder Treatment Team (WSDTT). These program types are organized around the model of an ambulatory clinic. Veterans typically come in for services with an upper limit of approximately two times a week for one or two clinical contacts each time.

For SIPPs, program types include the Evaluation and Brief Treatment Unit (EBTPU), the PTSD Domiciliary (PTSD Dom), the PTSD Residential Rehabilitation Program (PRRP), the Specialized Inpatient PTSD Unit (SIPU), and the Women's Trauma Recovery Program (WTRP). Also included, as an intensive program, is the PTSD Day Hospital (DH). PTSD Day Hospitals are outpatient in nature but involve coming in for services either on a daily basis or several times a week in which the clinical contacts are of four to eight hours duration.

Sources of Data

At the end of each fiscal year, the Northeast Program Evaluation Center (NEPEC) conducts a survey of all VA facilities with specialized PTSD programs asking for information concerning the workload, the FTEE and the expenditures for each program. This survey is called the *Specialized PTSD Programs Annual Report*. In FY 1997 the Annual Report was expanded to include a comprehensive assessment of all nursing staff as part of the total FTEE accounting for each intensive program. For this reason, FY 1997 is generally used as the base year for all differences computed for intensive programs. The only exception to this procedure is when FY 1997 data are not reported. For those situations, FY 1998 data are used, as noted in the affected tables. For outpatient programs, differences are calculated between FY 1996 and FY 2003.

For SOPPs, the number of veterans seen, the number of veterans treated and the number of outpatient visits are derived from the stop code data that are obtained from the Austin Data Processing Center in Austin, Texas. Veterans *seen* include all veterans receiving services, while veterans *treated* include only those seen more than once. *New veterans*

treated are those who were not seen in the previous fiscal year. For SIPPs, the number of veterans admitted and the number of bed days are obtained from the Annual Report.

Workload for SOPPs

Workload data for the SOPPs are presented by VISN in Table 3-1 and by individual program in Table 3-2. Differences from FY 1996 to FY 2003 are presented for number of visits, number of veterans seen, number of veterans treated and the percent of new veterans treated. Table 3-1 presents the unique number of veterans seen, the unique number of veterans treated, and the unique number of new veterans by VISN and nationally for FY 2003. In the past, these data were presented in years prior to 2001 as the sum of the individual programs. This allowed for a duplicated count of veterans. For FY 2001 and beyond, it was decided that these data would be totaled in two different ways: (1) as the “SUM” of the individual programs; and (2), as the unduplicated counts of veterans, which are determined for the VA as a total system as “ALL VA”. The number of visits, the number of veterans seen, and the number of veterans treated represent *Gross Output*. *Productivity* is represented by two indices. One index is the number of visits per filled FTEE. This index is relevant to the standard of 1000 visits per FTEE that was the operative standard in VA prior to the adoption of the Special Emphasis Program (SEP) goals as specified in VHA Directive 96-051, *Veterans Health Administration Special Emphasis Programs*. The other index, the number of veterans treated per filled FTEE, is relevant to the SEP goal of 75 veterans treated per FTEE. VISNs and individual programs not meeting these targets are boxed/highlighted in the tables. Nationally for FY 2003, the total number of visits for ALL VA was 645,895 the total number of veterans seen was 71,538 and the total number of veterans treated was 54,533. The percent of veterans treated who were new was 30% (see Table 3-1).

Workload for SIPPs

Workload data for the SIPPs can be found by VISN in Table 3-3 and by individual VA facility in Table 3-4. For each VA facility, the total number of admissions (episodes) to all programs and the total days of treatment represent *gross output*. *Efficiency* is represented the number of days of treatment per admission. “Total days of treatment”, for programs other than PTSD Day Hospitals, is equal to the bed days of care reported on the Annual Report. For PTSD Day Hospitals, the number of stop code visits accrued for the fiscal year represents days of treatment. Total days of treatment for PTSD Day Hospitals is generally less than the actual number of days spent in the program. This is due to the fact that PTSD Day Hospitals do not provide treatment seven days a week. Differences are presented for each variable. Across all VISNs for FY 2003, the total number of admissions was 4,302 and the total number of days of treatment was 166,908 (see Table 3-3).

Staffing of the SOPPs

Staffing of the SOPPs, represented as filled FTEE, and the change in staffing levels between FY 1996 and FY 2003 are presented by VISN in Table 3-5 and by individual program in Table 3-6. Filled FTEE is calculated from the data supplied from the Annual Report. [See Appendix C.] A total of 526.89 FTEE were filled for FY 2003. There was substantial shifting within individual programs resulting in an increase of 105.47 FTEE in staffing levels nationally.

Staffing of the SIPP

Staffing of the SIPP and the change in staffing levels are presented by VISN in Table 3-7 and by individual VA facility in Table 3-8. Overall, there were 318.46 FTEE filled for FY 2003. As in the past, there were a number of programmatic changes within the SIPP during FY 2003. Several VA facilities reconfigured inpatient units to PRRPs, PTSD Doms and PTSD Day Hospitals. Adjustments in staffing levels accompanied these changes. SIPP FTEE experienced a drop of 277.94 FTEE throughout all VA over the period from FY 1997 through FY 2003.

Costs of the SIPP

The direct costs for the SIPP are presented in Table 3-9 by VISN and in Table 3-10 by individual program. Direct costs are calculated by using filled FTEE and expenditure data supplied from the Annual Report. [See Appendix C.] The *cost-efficiency* of the programs is represented by two indices: cost per visit and cost per capita. The former is calculated as the ratio of direct costs to number of visits, and the latter is calculated as the ratio of direct costs to number of veterans treated. In addition, differences between FY 2003 and FY 1996 are presented for cost per visit, cost per capita and direct costs. As seen in Table 3-9, the SIPP treated nationwide a total of 54,533 veterans with 645,895 visits at an overall direct cost of \$50,770,858. The average cost per visit was \$79. The average cost per capita was \$931.

Costs of the SIPP

The direct costs for the SIPP are presented by VISN in Table 3-11 and by individual VA facility in Table 3-12. The *cost-efficiency* of the programs is represented by two indices: cost per diem and cost per capita. The former is calculated as the ratio of direct costs to number of days of treatment, and the latter is calculated as the ratio of direct costs to number of veterans admitted. The differences in costs are also calculated. Nationwide in FY 2003, the SIPP admitted a total of 4,302 veterans with 169,927 days of treatment at an overall direct cost of \$23,394,284. The average cost per diem was \$138, a decrease of \$13, and the average cost per capita was \$5,438 a decrease of \$321.

Table 3-1. Workload for Specialized Outpatient PTSD Programs, by VISN.

VISN	FY 2003			DIFF: FY 2003 - FY 1996			FY 2003			FY 2003		DIFF: FY 2003 - 1996
	# VISITS	# VETS SEEN	# VETS TREATED	# VISITS	# VETS SEEN	# VETS TREATED	FILLED FTEE	# VISITS PER FILLED FTEE	# VETS TREATED PER FILLED FTEE	# NEW VETS TREATED	# NEW VETS TREATED/ VETS TREATED (%)	# NEW VETS TREATED/ VETS TREATED (%)
1	48,710	4,068	3,423	13,447	793	1,042	29.84	1,632	115	828	24%	-16%
2	10,519	992	805	3,268	469	387	11.80	891	68	286	36%	12%
3	39,496	3,162	2,464	18,299	1,747	1,399	24.72	1,598	100	604	25%	-16%
4	24,327	2,997	2,286	3,347	907	911	26.12	931	88	665	29%	-6%
5	21,308	2,174	1,613	8,305	1,155	864	11.05	1,928	146	783	49%	-9%
6	24,963	3,622	2,757	9,851	1,799	1,343	17.46	1,430	158	857	31%	-10%
7	37,963	4,359	3,079	21,129	2,739	1,902	34.89	1,088	88	1,013	33%	-10%
8	27,133	3,635	2,716	9,416	1,943	1,527	23.77	1,142	114	798	29%	-9%
9	17,307	3,076	2,125	4,382	1,409	880	16.44	1,053	129	680	32%	-20%
10	26,012	2,961	2,082	20,530	2,269	1,522	37.04	702	56	647	31%	-8%
11	17,861	2,134	1,599	6,969	628	549	18.20	981	88	435	27%	-4%
12	12,681	1,089	797	1,052	208	118	13.95	909	57	277	35%	-16%
15	29,780	2,879	2,233	11,137	1,386	1,098	20.86	1,427	107	559	25%	-11%
16	82,865	9,531	7,384	43,874	5,403	4,369	56.60	1,464	130	1,937	26%	-7%
17	26,690	3,124	2,268	6,423	1,455	951	23.74	1,124	96	686	30%	-23%
18	31,387	4,066	3,069	9,026	1,808	1,441	23.23	1,351	132	872	28%	-13%
19	16,396	2,402	1,859	4,660	1,174	935	14.55	1,127	128	603	32%	-9%
20	50,175	5,306	4,197	28,249	3,303	2,720	37.79	1,328	111	1,398	33%	-11%
21	34,827	2,952	2,154	14,960	1,358	912	25.59	1,361	84	753	35%	-13%
22	36,855	4,051	3,081	21,998	3,067	2,369	27.47	1,342	112	1,029	33%	-5%
23	28,640	3,254	2,664	-2,492	612	707	31.79	901	84	672	25%	-12%
SUM	645,895	71,834	54,655	257,830	35,632	27,946	526.89	1,226	104	16,382	30%	-11%
ALL VA	645,895	71,538	54,533	257,830	35,715	27,996	529.89	1,219	103	16,359	30%	-11%

Note: A boxed/highlighted cell signifies a VISN whose Specialized Outpatient Treatment does not meet the standard of 1000 visits per filled FTEE, and/or does not meet the goal of 75 veterans treated per filled FTEE.

Table 3.2 Workload for Specialized Outpatient PTSD Programs, by Individual Program, FY 2003.

VISN	FACILITY	PROGRAM	FY 2003			DIFF: FY 2003 - FY 1996			FY 2003			FY 2003		DIFF: FY 2003 - FY 1996
			# VISITS	# VETS SEEN	# VETS TREATED	# VISITS	# VETS SEEN	# VETS TREATED	# FILLED FTEE	# VISITS PER FILLED FTEE	# VETS TREATED PER FILLED FTEE	# NEW VETS TREATED	# NEW VETS TREATED/# VETS TREATED (%)	# NEW VETS TREATED/# VETS TREATED (%)
1	BOSTON (MA) HCS: Boston	PCT	7,030	645	462	3,277	274	156	4.03	1,745	115	210	45%	-18%
1	BOSTON (MA) HCS: Boston	WSDTT	3,799	265	222	945	-22	69	3.40	1,118	65	72	32%	-32%
1	BOSTON (MA) HCS: Brockton	PCT	5,454	493	447	1,950	172	193	2.53	2,160	177	96	21%	-36%
1	BOSTON (MA) HCS: Brockton	SUPT	792	121	101	-3,465	-571	-331	2.05	386	49	5	5%	-52%
1	CONNECTICUT HCS: West Haven*	PCT	11,043	779	674	11,043	779	674	4.39	2,516	154	132	20%	NC
1	CONNECTICUT HCS: West Haven	SUPT	2,972	289	247	-32	2	53	3.70	803	67	38	15%	-24%
1	MANCHESTER, NH	PCT	2,684	232	198	-239	3	16	2.71	989	73	56	28%	-27%
1	PROVIDENCE, RI	PCT	11,950	1,099	924	5,011	513	448	4.70	2,541	196	153	17%	-22%
1	TOGUS, ME**	PCT	0	0	0	-4,110	-487	-364	0.00	NA	NA	0	NA	NA
1	WHITE RIVER JUNCTION, VT	PCT	2,986	424	347	-933	-103	-46	2.33	1,280	149	84	24%	-11%
2	CANANDAIGUA, NY	PCT	4,600	366	305	670	108	87	4.29	1,073	71	111	36%	8%
2	SYRACUSE, NY*	PCT	2,500	315	256	2,500	315	256	3.52	709	73	103	40%	NC
2	WESTERN NY HCS: Batavia	PCT	3,419	328	251	98	51	-54	3.99	857	63	73	29%	-27%
3	BRONX, NY	PCT	11,823	608	507	5,007	333	296	8.52	1,388	60	116	23%	-16%
3	HUDSON VALLEY (NY) HCS: Castle Point*	PCT	1,756	219	148	1,756	219	148	1.00	1,756	148	82	55%	NC
3	NEW JERSEY HCS: East Orange	PCT	4,428	511	351	2,963	368	238	4.65	952	75	99	28%	-72%
3	NEW YORK HARBOR HCS: Brooklyn	PCT	9,166	985	758	-1,799	333	267	4.88	1,880	155	155	20%	-15%
3	NEW YORK HARBOR HCS: New York	PCT	12,323	867	713	10,372	545	470	5.68	2,170	126	153	21%	-22%
4	CLARKSBURG, WV**	PCT	0	0	0	-4,235	-538	-366	0.00	NA	NA	0	NA	NA
4	COATESVILLE, PA	PCT	5,746	577	414	675	98	43	7.55	761	55	138	33%	-10%
4	PHILADELPHIA, PA	PCT	9,748	1,264	1,013	4,831	481	528	8.10	1,203	125	292	29%	-11%
4	PITTSBURGH (PA) HCS: Highland Drive	PCT	6,095	885	660	1,499	353	203	7.44	819	89	194	29%	-6%
4	PITTSBURGH (PA) HCS: Highland Drive	SUPT	2,738	297	213	577	92	38	3.03	905	70	46	22%	-13%
5	MARYLAND HCS: Baltimore	PCT	6,940	625	501	3,011	216	224	3.35	2,070	149	197	39%	-13%
5	MARYLAND HCS: Perry Point	PCT	4,867	566	456	2,327	333	268	2.40	2,028	190	273	60%	-40%
5	WASHINGTON, DC	PCT	9,501	1,072	720	2,967	713	428	5.30	1,792	136	341	47%	0%
6	ASHEVILLE, NC	PCT	3,662	301	271	2,394	119	162	2.15	1,703	126	43	16%	-77%
6	DURHAM, NC	PCT	4,428	1,128	876	651	519	384	5.05	877	173	358	41%	-12%
6	FAYETTEVILLE, NC*	PCT	5,101	322	262	5,101	322	262	1.78	2,866	147	94	36%	NC
6	HAMPTON, VA	PCT	8,587	1,125	924	2,357	526	417	5.56	1,545	166	258	28%	-10%
6	SALISBURY, NC	PCT	3,185	774	430	-652	366	128	2.93	1,089	147	106	25%	-10%
7	ATLANTA, GA	PCT	6,082	656	445	2,021	339	240	2.73	2,232	163	151	34%	-29%
7	AUGUSTA, GA*	PCT	11,668	1,135	860	11,668	1,135	860	12.47	936	69	228	27%	NC
7	BIRMINGHAM, AL	PCT	3,525	953	608	521	498	278	4.44	794	137	232	38%	-11%
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	5,826	547	365	3,000	275	147	4.70	1,240	78	150	41%	-12%
7	CHARLESTON, SC	PCT	4,069	557	437	958	213	154	3.63	1,122	121	116	27%	-13%
7	DUBLIN, GA*	PCT	6,793	542	375	6,793	542	375	6.93	980	54	137	37%	NC
7	TUSCALOOSA, AL**	PCT	0	0	0	-3,832	-483	-358	0.00	NA	NA	0	NA	NA
8	BAY PINES, FL	PCT	6,462	1,170	835	3,226	819	617	9.06	713	92	178	21%	-39%
8	MIAMI, FL	PCT	5,608	480	383	2,375	255	234	3.66	1,533	105	66	17%	-14%
8	NO.FL/SO.GA VETERANS HCS: Gainesville	PCT	5,187	594	441	2,661	375	267	4.35	1,193	101	171	39%	-17%
8	SAN JUAN, PR	PCT	3,295	534	421	-444	-1	44	3.70	891	114	42	10%	-19%
8	TAMPA, FL	PCT	6,581	873	641	1,598	550	389	3.00	2,194	214	342	53%	2%

Table 3.2 Workload for Specialized Outpatient PTSD Programs, by Individual Program, FY 2003.

VISN	FACILITY	PROGRAM	FY 2003			DIFF: FY 2003 - FY 1996			FY 2003			FY 2003		DIFF: FY 2003 - FY 1996
			# VISITS	# VETS SEEN	# VETS TREATED	# VISITS	# VETS SEEN	# VETS TREATED	# FILLED FTEE	# VISITS PER FILLED FTEE	# VETS TREATED PER FILLED FTEE	# NEW VETS TREATED	# NEW VETS TREATED/#VETS TREATED (%)	# NEW VETS TREATED/# VETS TREATED (%)
9	HUNTINGTON, WV*	PCT	1,679	612	241	1,679	612	241	2.69	624	90	135	56%	NC
9	LEXINGTON, KY	PCT	3,818	291	255	2,768	77	95	3.35	1,140	76	112	44%	-56%
9	LOUISVILLE, KY	PCT	1,622	378	291	-89	94	82	2.05	791	142	93	32%	-51%
9	MEMPHIS, TN	PCT	4,628	740	550	473	353	248	3.17	1,459	173	203	37%	-9%
9	MIDDLE TN HCS: Murfreesboro**	PCT	0	0	0	-1,741	-210	-172	0.00	NA	NA	0	NA	NA
9	MIDDLE TN HCS: Nashville**	PCT	0	0	0	-597	-88	-78	0.00	NA	NA	0	NA	NA
9	MOUNTAIN HOME, TN	PCT	5,560	1,055	788	1,889	475	361	5.18	1,074	152	137	17%	-30%
10	BRECKSVILLE, OH*	PCT	11,276	900	650	11,276	900	650	12.43	908	52	185	28%	NC
10	BRECKSVILLE, OH	WSDTT	1,462	136	100	-297	-69	-56	3.40	430	29	29	29%	-33%
10	CHILLICOTHE, OH	PCT	3,349	731	582	-374	240	155	4.67	717	125	97	17%	-21%
10	CINCINNATI, OH*	PCT	5,971	678	448	5,971	678	448	10.64	561	42	185	41%	NC
10	COLUMBUS, OH*	PCT	2,218	389	206	2,218	389	206	3.05	727	68	101	49%	NC
10	DAYTON, OH*	PCT	1,736	251	182	1,736	251	182	2.85	609	64	70	38%	NC
11	ANN ARBOR (MI) HCS	PCT	3,596	339	243	1,149	102	76	3.06	1,174	79	90	37%	-2%
11	BATTLE CREEK, MI	PCT	6,577	824	638	3,314	272	308	4.79	1,374	133	159	25%	-17%
11	DANVILLE, IL	PCT	2,697	424	290	167	106	24	2.55	1,058	114	87	30%	-15%
11	NORTHERN IN HCS: Fort Wayne*	PCT	958	157	111	958	157	111	3.21	298	35	33	30%	NC
11	NORTHERN IN HCS: Marion	PCT	4,033	428	340	1,381	70	52	4.59	878	74	69	20%	-7%
12	CHICAGO (IL) HCS: West Side	PCT	8,753	579	490	1,609	-68	215	6.48	1,352	76	150	31%	-5%
12	HINES, IL	PCT	1,654	246	93	-1,295	10	-110	3.10	534	30	12	13%	-31%
12	IRON MOUNTAIN, MI**	PCT	0	0	0	-1,536	-291	-204	0.00	NA	NA	0	NA	NA
12	MADISON, WI*	WSDTT	2,274	266	214	2,274	266	214	4.38	520	49	115	54%	NC
15	EASTERN KS HCS: Topeka	PCT	8,827	498	432	944	47	22	7.00	1,261	62	62	14%	-26%
15	KANSAS CITY, MO	PCT	5,221	721	552	2,084	410	323	3.97	1,316	139	178	32%	-19%
15	POPLAR BLUFF, MO	PCT	2,180	343	300	2,180	343	300	2.13	1,024	141	72	24%	NC
15	ST. LOUIS, MO	PCT	9,351	994	718	6,067	660	435	5.08	1,843	141	167	23%	-28%
15	WICHITA, KS	PCT	4,201	330	235	-138	-1	-10	2.69	1,561	87	80	34%	0%
16	CENTRAL AR VETERANS HCS (Little Rock)*	PCT	7,098	1,563	1,151	7,098	1,563	1,151	7.69	923	150	289	25%	NC
16	FAYETTEVILLE, AR	PCT	3,456	970	626	1,042	472	245	2.84	1,216	220	134	21%	-16%
16	GULF COAST (MS) VETERANS HCS (Biloxi)	PCT	10,226	1,150	938	5,808	549	512	5.92	1,728	159	414	44%	13%
16	HOUSTON, TX	PCT	20,168	2,132	1,669	11,063	1,318	1,031	18.15	1,111	92	369	22%	-18%
16	JACKSON, MS	PCT	5,458	958	818	1,704	514	503	5.81	939	141	161	20%	-25%
16	NEW ORLEANS, LA	PCT	24,460	2,130	1,635	13,494	727	682	9.27	2,640	176	428	26%	-15%
16	NEW ORLEANS, LA	WSDTT	643	86	59	-914	-180	-94	1.90	338	31	21	36%	-11%
16	OKLAHOMA CITY, OK	PCT	11,356	645	545	4,579	176	154	5.03	2,260	108	137	25%	-23%
17	CENTRAL TX VETERANS HCS: Austin*	PCT	3,441	435	295	3,441	435	295	3.65	942	81	166	56%	NC
17	CENTRAL TX VETERANS HCS: Temple	PCT	4,443	432	287	1,642	274	155	3.18	1,395	90	113	39%	-58%
17	CENTRAL TX VETERANS HCS: Waco	PCT	4,113	420	316	-1,076	68	3	3.90	1,054	81	75	24%	-76%
17	NORTH TX HCS: Dallas	PCT	7,930	549	397	1,749	47	30	6.00	1,322	66	136	34%	-13%
17	SOUTH TX VETERANS HCS: San Antonio	PCT	6,763	1,330	992	667	710	477	7.00	966	142	203	20%	-13%

Table 3.2 Workload for Specialized Outpatient PTSD Programs, by Individual Program, FY 2003.

			FY 2003			DIFF: FY 2003 - FY 1996			FY 2003			FY 2003		DIFF: FY 2003 - FY 1996
			# VISITS	# VETS SEEN	# VETS TREATED	# VISITS	# VETS SEEN	# VETS TREATED	# FILLED FTEE	# VISITS PER FILLED FTEE	# VETS TREATED PER FILLED FTEE	# NEW VETS TREATED	TREATED/#VETS TREATED (%)	# NEW VETS TREATED/# VETS TREATED (%)
VISN	FACILITY	PROGRAM	# VISITS	SEEN	TREATED	# VISITS	SEEN	TREATED	FTEE	FILLED FTEE	FILLED FTEE	# NEW VETS TREATED	TREATED/#VETS TREATED (%)	# NEW VETS TREATED/# VETS TREATED (%)
18	EL PASO (TX) VETERANS HCS	PCT	6,222	788	543	-786	34	30	4.69	1,325	116	165	30%	-16%
18	NEW MEXICO HCS (Albuquerque)	PCT	13,416	1,781	1,410	6,602	1,263	1,001	10.25	1,309	138	407	29%	-27%
18	PHOENIX, AZ	PCT	6,036	612	509	1,444	186	179	4.79	1,260	106	93	18%	-34%
18	SOUTHERN AZ HCS (Tucson)	PCT	5,713	895	614	1,766	405	248	3.50	1,632	175	208	34%	-10%
19	CHEYENNE, WY	PCT	1,861	248	193	-700	-90	-84	2.10	886	92	97	50%	16%
19	EASTERN COLORADO HCS: Denver**	PCT	0	0	0	-3,389	-336	-243	0.00	NA	NA	0	NA	NA
19	EASTERN COLORADO: Pueblo*	PCT	2,500	494	312	2,500	494	312	1.64	1,524	190	93	30%	NC
19	GRAND JUNCTION, CO	PCT	2,262	392	336	1,113	246	241	3.48	651	97	103	31%	-69%
19	SALT LAKE CITY (UT) HCS	PCT	9,773	1,270	1,019	5,136	877	713	7.33	1,333	139	310	30%	-15%
20	BOISE, ID	PCT	3,195	353	242	-1,508	-176	-142	5.38	594	45	94	39%	-4%
20	PORTLAND, OR	PCT	10,137	1,141	938	6,667	863	640	8.94	1,134	105	375	40%	-7%
20	PUGET SOUND (WA) HCS: Seattle	PCT	32,943	3,441	2,720	19,190	2,004	1,633	20.57	1,602	132	793	29%	-26%
20	SPOKANE, WA*	PCT	3,900	461	346	3,900	461	346	2.91	1,339	119	145	42%	NC
21	HONOLULU, HI	PCT	6,856	521	358	3,024	139	79	5.60	1,224	64	108	30%	-15%
21	NORTHERN CA HCS	PCT	1,089	273	148	-1,432	-140	-167	2.70	403	55	99	67%	-25%
21	PALO ALTO (CA) HCS: San Jose	PCT	10,181	724	578	6,789	435	342	3.20	3,182	181	196	34%	-28%
21	SAN FRANCISCO, CA	PCT	12,242	1,244	941	5,950	494	330	9.34	1,311	101	298	32%	-26%
21	SAN FRANCISCO, CA	SUPT	4,459	224	149	629	40	13	4.75	939	31	59	40%	-7%
22	GREATER LOS ANGELES (CA) HCS: East LA	PCT	6,488	640	517	1,261	129	146	3.94	1,649	131	89	17%	-18%
22	GREATER LOS ANGELES (CA) HCS: West LA	PCT	1,999	514	330	1,999	514	330	8.83	226	37	134	41%	NC
22	LOMA LINDA, CA	PCT	3,363	285	217	352	32	24	2.11	1,594	103	83	38%	-2%
22	LOMA LINDA, CA	WSDTT	1,934	291	205	-132	142	92	2.58	749	79	67	33%	-11%
22	SAN DIEGO (CA) HCS CA	PCT	16,068	1,635	1,295	11,515	1,090	866	5.65	2,842	229	402	31%	-22%
22	SOUTHERN NV HCS (Las Vegas)*	PCT	7,003	720	534	7,003	720	534	4.36	1,607	123	255	48%	NC
23	BLACK HILLS (SD) HCS: Fort Meade	SUPT	4,578	366	310	463	91	102	5.00	916	62	71	23%	-15%
23	CENTRAL IA HCS: Knoxville*	PCT	2,403	154	127	2,403	154	127	1.30	1,848	98	26	20%	NC
23	CENTRAL IA HCS: Knoxville**	SUPT	0	0	0	-4,387	-290	-254	0.00	NA	NA	0	NA	NA
23	IOWA CITY, IA	PCT	4,094	758	594	266	116	165	3.88	1,057	153	175	29%	-2%
23	MINNEAPOLIS, MN	PCT	9,946	1,051	904	2,518	424	424	11.90	836	76	206	23%	-17%
23	NE-WESTERN IA HCS: Lincoln	PCT	2,264	340	218	20	171	78	2.83	801	77	70	32%	-11%
23	NE-WESTERN IA HCS: Omaha	PCT	4,170	419	355	1,588	211	188	4.39	949	81	102	29%	-15%
23	SIOUX FALLS, SD	PCT	1,185	181	164	325	55	73	2.50	474	66	24	15%	-25%
23	ST. CLOUD, MN**	PCT	0	0	0	-5,688	-545	-421	0.00	NA	NA	0	NA	NA
SUM			645,895	72,849	55,265	257,830	33,620	25,749	526.90	1,224	105	16,505	30%	-19%
ALL VA			645,895	71,538	54,533	257,830	35,715	27,996	526.90	1,226	103	16,359	30%	-11%

Note: A boxed/highlighted cell signifies a program whose Specialized Outpatient Treatment does not meet the standard of 1000 visits per filled FTEE, and/or does not meet the goal of 75 veterans per treated filled FTEE.

NA=Not applicable. NC=Not calculated because one or more of the components were missing.

* The Specialized Outpatient PTSD program at this facility was not open in the base year.

** The Specialized Outpatient PTSD program at this facility was closed for all of the current fiscal year.

Table 3-3. Workload for Specialized Intensive PTSD Programs, by VISN, FY 2003.

VISN	FY 2003			DIFFERENCE: FY 2003- FY1997		
	# OF ADMISSIONS	# OF DAYS OF TREATMENT	LENGTH OF PROGRAM	# OF ADMISSIONS	# OF DAYS OF TREATMENT	LENGTH OF PROGRAM
1	368	11,099	30	-52	-3,756	-5
2	291	3,541	12	51	-407	-4
3	296	12,885	44	-227	-6,076	7
4	227	14,476	64	-149	-1,149	22
5	202	17,381	86	-24	7,494	42
6	268	9,531	36	31	506	-3
7**	0	0	NA	-811	-19,567	NA
8	157	8,882	57	20	1,031	-1
10	124	4,328	35	-93	-6,961	-17
11	381	8,145	21	87	-454	-8
12	367	17,804	49	-36	1,346	8
15	90	6,904	77	-21	-4,046	-22
16	346	11,433	33	-26	-1,158	-1
17	100	6,113	61	-29	-1,002	6
18*	80	1,392	17	80	1,392	NA
19	128	815	6	-57	-7,965	-41
20	505	12,447	25	-197	-8,017	-5
21	274	15,477	57	-94	-3,553	5
22**	0	0	NA	-82	-4,703	NA
23	98	4,255	43	-83	-5,270	-9
ALL VA	4,302	166,908	39	-1,712	-62,315	1

Note: No Specialized Intensive Program was located in VISN 9 for these fiscal years.

NA=Not Applicable.

* No Specialized Intensive PTSD Program in this VISN was open in the base year.

** No Specialized Intensive PTSD Program in this VISN was open in the current fiscal year.

Table 3-4. Workload for Specialized Intensive PTSD Programs, by VA Facility, FY 2003.

VISN	FACILITY	FY 2003			DIFFERENCE: FY 2003 - FY 1997		
		# Of ADMISSIONS	#Of DAYS OF TREATMENT	LENGTH OF PROGRAM (days)	# Of ADMISSIONS	# OF DAYS OF TREATMENT	LENGTH OF PROGRAM (days)
1	CONNECTICUT HCS: West Haven	28	3,035	108	-18	-399	34
1	NORTHAMPTON, MA	83	5,607	68	-26	-1,393	3
1	TOGUS, ME†	213	1,962	15	22	-1,851	-1
1	WHITE RIVER JUNCTION, VT†	44	495	15	-30	-113	-5
2	WESTERN NY HCS: Batavia	291	3,541	26	51	-407	10
3	BRONX, NY**	0	0	NA	-146	-2,972	NA
3	HUDSON VALLEY (NY) HCS: Montrose	136	5,954	44	-44	-713	7
3	NEW JERSEY HCS: Lyons	160	6,931	43	-37	-2,391	-4
4	CLARKSBURG, WV	75	3,428	46	-69	1,646	33
4	COATESVILLE, PA	152	11,048	73	-80	-2,795	13
5	MARTINSBURG, WV	129	14,915	116	6	6,061	44
5	MARYLAND HCS: Baltimore	73	2,466	34	-30	1,433	24
6	SALEM, VA	119	3,723	31	2	-365	-4
6	SALISBURY, NC	149	5,808	39	29	871	-2
7	AUGUSTA, GA**	0	0	NA	-431	-8,505	NA
7	CENTRAL AL VETERANS HCS: Tuskegee**	0	0	NA	-210	-5,534	NA
7	TUSCALOOSA, AL† **	0	0	NA	-170	-5,528	NA
8	BAY PINES, FL	92	3,950	43	16	414	-4
8	MIAMI, FL	65	4,932	76	4	617	NA
10	BRECKSVILLE, OH	19	432	70	-29	-2,928	0
10	CINCINNATI, OH	42	2,045	49	-64	-1,591	15
10	DAYTON, OH	63	1,851	90	0	-2,442	22
11	BATTLE CREEK, MI	381	8,145	21	87	-454	-8
12	MILWAUKEE, WI	30	6,466	216	12	1,342	-69
12	NORTH CHICAGO, IL	252	7,601	30	-23	-422	1
12	TOMAH, WI	85	3,737	44	-25	426	14
15	EASTERN KS HCS: Topeka	90	6,904	77	-21	-4,046	-22
16	CENTRAL AR VETERANS HCS (Little Rock)	186	6,736	36	38	-1,027	-16
16	JACKSON, MS	96	2,287	24	-29	-38	5
16	NEW ORLEANS, LA	64	2,410	38	-35	-93	12
17	CENTRAL TX VETERANS HCS: Waco	100	6,113	61	-29	-1,002	6
18	SOUTHERN AZ HCS (Tucson)*	80	1,392	17	80	1,392	NA
19	EASTERN COLORADO HCS: Denver	128	815	37	17	-4,796	-14
19	SHERIDAN, WY**	0	0	NA	-74	-3,169	NA

Table 3-4. Workload for Specialized Intensive PTSD Programs, by VA Facility, FY 2003.

VISN	FACILITY	FY 2003			DIFFERENCE: FY 2003 - FY 1997		
		# Of ADMISSIONS	#Of DAYS OF TREATMENT	LENGTH OF PROGRAM (days)	# Of ADMISSIONS	# OF DAYS OF TREATMENT	LENGTH OF PROGRAM (days)
20	ALASKA HCS (Anchorage)**	0	0	NA	-38	-3,650	NA
20	BOISE, ID	19	678	36	-5	-210	-1
20	PUGET SOUND (WA) HCS: American Lake	120	4,836	40	-112	-3,743	3
20	PUGET SOUND (WA) HCS: Seattle	244	3,453	14	-43	-578	0
20	ROSEBURG (OR) HCS	122	3,480	29	1	164	1
21	HILO, HI	36	2,149	60	-54	-1,776	16
21	PALO ALTO (CA) HCS: Menlo Park	238	13,328	56	-40	-1,777	2
22	GREATER LOS ANGELES (CA) HCS: West LA**	0	0	NA	-82	-4,703	NA
23	BLACK HILLS (SD) HCS: Hot Springs*	54	2,618	48	54	2,618	NA
23	CENTRAL IA HCS: Des Moines	44	1,637	37	-22	-743	1
23	CENTRAL IA HCS: Knoxville**	0	0	NA	-67	-6,692	NA
23	MINNEAPOLIS, MN† **	0	0	NA	-48	-453	NA
ALL VA		4,302	166,908	39	-1,712	-62,315	1

Note: "Length of Program" for the PTSD Day Hospitals is reported from the current fiscal year's Annual Report For PTSD Specialized Programs as "Anticipated Length of Treatment".

Note: No Specialized Intensive Program was located in VISN 9 for these fiscal years.

NA=Not Applicable.

† For this facility FY 1998 data were used as baseline for computing differences, because FY 1997 data were missing for one or more components.

* No Specialized Intensive PTSD program at this facility was open in the base year.

** No Specialized Intensive PTSD program at this facility was open in the current fiscal year.

Table 3.5. FTEE for Specialized Outpatient PTSD Programs, by VISN, FY 2003.

VISN	FILLED FTEE FY 2003	DIFFERENCE: FILLED FTEE FY 2003 - FY 1996
1	29.84	-6.72
2	11.80	3.60
3	24.72	4.05
4	26.12	0.74
5	11.05	-1.35
6	17.46	2.43
7	34.89	15.10
8	23.77	2.22
9	16.44	-6.84
10	37.04	29.49
11	18.20	1.73
12	13.95	1.90
15	20.86	5.16
16	56.60	21.29
17	23.74	4.00
18	23.23	2.14
19	14.55	1.43
20	37.79	15.13
21	25.59	1.36
22	27.47	11.05
23	31.79	-2.43
ALL VA	526.89	105.47

Table 3.6. FTEE for Specialized Outpatient PTSD Programs, by Individual Program, FY 2003.

VISN	FACILITY	PROGRAM	FILLED FTEE FY 2003	DIFFERENCE: FILLED FTEE FY 2003 - FY 1996
1	BOSTON (MA) HCS: Boston	PCT	4.03	0.11
1	BOSTON (MA) HCS: Boston	WSDTT	3.40	-2.25
1	BOSTON (MA) HCS: Brockton	PCT	2.53	-1.06
1	BOSTON (MA) HCS: Brockton	SUPT	2.05	-2.10
1	CONNECTICUT HCS: West Haven*	PCT	4.39	4.39
1	CONNECTICUT HCS: West Haven	SUPT	3.70	-0.30
1	MANCHESTER, NH	PCT	2.71	0.21
1	PROVIDENCE, RI	PCT	4.70	-1.05
1	TOGUS, ME**	PCT	0.00	-3.10
1	WHITE RIVER JUNCTION, VT	PCT	2.33	-1.58
2	CANANDAIGUA, NY	PCT	4.29	0.09
2	SYRACUSE, NY*	PCT	3.52	3.52
2	WESTERN NY HCS: Batavia	PCT	3.99	-0.01
3	BRONX, NY	PCT	8.52	4.92
3	HUDSON VALLEY (NY) HCS: Castle Point*	PCT	1.00	1.00
3	NEW JERSEY HCS: East Orange	PCT	4.65	0.81
3	NEW YORK HARBOR HCS: Brooklyn	PCT	4.88	-2.36
3	NEW YORK HARBOR HCS: New York	PCT	5.68	-0.32
4	CLARKSBURG, WV**	PCT	0.00	-3.72
4	COATESVILLE, PA	PCT	7.55	2.54
4	PHILADELPHIA, PA	PCT	8.10	2.95
4	PITTSBURGH (PA) HCS: Highland Drive	PCT	7.44	0.94
4	PITTSBURGH (PA) HCS: Highland Drive	SUPT	3.03	-1.98
5	MARYLAND HCS: Baltimore	PCT	3.35	0.49
5	MARYLAND HCS: Perry Point	PCT	2.40	-0.20
5	WASHINGTON, DC	PCT	5.30	-1.64
6	ASHEVILLE, NC	PCT	2.15	0.05
6	DURHAM, NC	PCT	5.05	0.76
6	FAYETTEVILLE, NC*	PCT	1.78	1.78
6	HAMPTON, VA	PCT	5.56	1.28
6	SALISBURY, NC	PCT	2.93	-1.44
7	ATLANTA, GA	PCT	2.73	-1.17
7	AUGUSTA, GA*	PCT	12.47	12.47
7	BIRMINGHAM, AL	PCT	4.44	0.54
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	4.70	0.83
7	CHARLESTON, SC	PCT	3.63	-0.50
7	DUBLIN, GA*	PCT	6.93	6.93
7	TUSCALOOSA, AL	PCT	0.00	-4.00
8	BAY PINES, FL	PCT	9.06	4.06
8	MIAMI, FL	PCT	3.66	-0.34
8	NO.FL/SO.GA VETERANS HCS: Gainesville	PCT	4.35	-0.36
8	SAN JUAN, PR	PCT	3.70	-0.30
8	TAMPA, FL	PCT	3.00	-0.84
9	HUNTINGTON, WV*	PCT	2.69	2.69
9	LEXINGTON, KY	PCT	3.35	-0.46
9	LOUISVILLE, KY	PCT	2.05	-2.95
9	MEMPHIS, TN	PCT	3.17	-0.83
9	MIDDLE TN HCS: Murfreesboro**	PCT	0.00	-4.00
9	MIDDLE TN HCS: Nashville**	PCT	0.00	-2.47
9	MOUNTAIN HOME, TN	PCT	5.18	1.18
10	BRECKSVILLE, OH*	PCT	12.43	12.43
10	BRECKSVILLE, OH	WSDTT	3.40	-0.35
10	CHILLICOTHE, OH	PCT	4.67	0.87
10	CINCINNATI, OH*	PCT	10.64	10.64
10	COLUMBUS, OH*	PCT	3.05	3.05
10	DAYTON, OH*	PCT	2.85	2.85

Table 3.6. FTEE for Specialized Outpatient PTSD Programs, by Individual Program, FY 2003.

VISN	FACILITY	PROGRAM	FILLED FTEE FY 2003	DIFFERENCE: FILLED FTEE FY 2003 - FY 1996
11	ANN ARBOR (MI) HCS	PCT	3.06	-1.64
11	BATTLE CREEK, MI	PCT	4.79	0.54
11	DANVILLE, IL	PCT	2.55	-0.97
11	NORTHERN IN HCS: Fort Wayne*	PCT	3.21	3.21
11	NORTHERN IN HCS: Marion	PCT	4.59	0.59
12	CHICAGO (IL) HCS: West Side	PCT	6.48	0.77
12	HINES, IL	PCT	3.10	-1.10
12	IRON MOUNTAIN, MI**	PCT	0.00	-2.15
12	MADISON, WI*	WSDTT	4.38	4.38
15	EASTERN KS HCS: Topeka	PCT	7.00	1.79
15	KANSAS CITY, MO	PCT	3.97	-0.02
15	POPLAR BLUFF, MO	PCT	2.13	2.13
15	ST. LOUIS, MO	PCT	5.08	1.08
15	WICHITA, KS	PCT	2.69	0.19
16	CENTRAL AR VETERANS HCS (Little Rock)*	PCT	7.69	7.69
16	FAYETTEVILLE, AR	PCT	2.84	-0.96
16	GULF COAST (MS) VETERANS HCS (Biloxi)	PCT	5.92	1.92
16	HOUSTON, TX	PCT	18.15	12.24
16	JACKSON, MS	PCT	5.81	1.51
16	NEW ORLEANS, LA	PCT	9.27	0.77
16	NEW ORLEANS, LA	WSDTT	1.90	-2.40
16	OKLAHOMA CITY, OK	PCT	5.03	0.53
17	CENTRAL TX VETERANS HCS: Austin*	PCT	3.65	3.65
17	CENTRAL TX VETERANS HCS: Temple	PCT	3.18	0.02
17	CENTRAL TX VETERANS HCS: Waco	PCT	3.90	-0.58
17	NORTH TX HCS: Dallas	PCT	6.00	-0.30
17	SOUTH TX VETERANS HCS: San Antonio	PCT	7.00	1.20
18	EL PASO (TX) VETERANS HCS	PCT	4.69	0.69
18	NEW MEXICO HCS (Albuquerque)	PCT	10.25	3.40
18	PHOENIX, AZ	PCT	4.79	-1.58
18	SOUTHERN AZ HCS (Tucson)	PCT	3.50	-0.37
19	CHEYENNE, WY	PCT	2.10	-1.42
19	EASTERN COLORADO HCS: Denver**	PCT	0.00	-3.75
19	EASTERN COLORADO: Pueblo*	PCT	1.64	1.64
19	GRAND JUNCTION, CO	PCT	3.48	1.76
19	SALT LAKE CITY (UT) HCS	PCT	7.33	3.20
20	BOISE, ID	PCT	5.38	-0.63
20	PORTLAND, OR	PCT	8.94	4.77
20	PUGET SOUND (WA) HCS: Seattle	PCT	20.57	8.08
20	SPOKANE, WA*	PCT	2.91	2.91
21	HONOLULU, HI	PCT	5.60	0.48
21	NORTHERN CA HCS	PCT	2.70	-0.63
21	PALO ALTO (CA) HCS: San Jose	PCT	3.20	-0.20
21	SAN FRANCISCO, CA	PCT	9.34	1.96
21	SAN FRANCISCO, CA	SUPT	4.75	-0.25
22	GREATER LOS ANGELES (CA) HCS: East LA	PCT	3.94	-1.06
22	GREATER LOS ANGELES (CA) HCS: West LA*	PCT	8.83	8.83
22	LOMA LINDA, CA	PCT	2.11	-1.89
22	LOMA LINDA, CA	WSDTT	2.58	-1.01
22	SAN DIEGO (CA) HCS CA	PCT	5.65	1.82
22	SOUTHERN NV HCS (Las Vegas)*	PCT	4.36	4.36
23	BLACK HILLS (SD) HCS: Fort Meade	SUPT	5.00	0.00
23	CENTRAL IA HCS: Knoxville*	PCT	1.30	1.30
23	CENTRAL IA HCS: Knoxville**	SUPT	0.00	-4.50
23	IOWA CITY, IA	PCT	3.88	-0.38
23	MINNEAPOLIS, MN	PCT	11.90	6.00
23	NE-WESTERN IA HCS: Lincoln	PCT	2.83	-0.09
23	NE-WESTERN IA HCS: Omaha	PCT	4.39	0.39
23	SIOUX FALLS, SD	PCT	2.50	-0.86
23	ST. CLOUD, MN**	PCT	0.00	-4.29
ALL VA			526.90	105.48

* The Specialized Outpatient PTSD program at this facility was not open in the base year.

** The Specialized Outpatient PTSD program at this facility was closed for all of the current fiscal year.

Table 3-7. FTEE for Specialized Intensive PTSD Programs, by VISN, FY 2003.

VISN	FILLED FTEE FY 2003	DIFFERENCE: FILLED FTEE FY 2003 - FY 1997
1	14.60	-5.12
2	8.80	-19.14
3	24.43	-21.07
4	27.98	-4.03
5	9.51	-1.22
6	30.28	-4.65
7	0.00	-67.62
8	10.80	-15.81
10	12.62	-13.42
11	12.55	-10.82
12	22.34	-7.56
15	15.30	-1.48
16	22.15	-28.57
17	18.22	1.77
18	4.30	4.30
19	6.79	-31.12
20	31.67	-12.87
21	38.80	-21.34
22	0.00	-7.89
23	7.31	-10.28
ALL VA	318.46	-277.94

Note: No Specialized Intensive Program was located in VISN 9 for these fiscal years.

Table 3-8. FTEE for Specialized Intensive PTSD Programs, by VA Facility, FY 2003.

VISN		FILLED FTEE FY 2003	DIFFERENCE: FILLED FTEE FY 2003 - FY 1997
1	CONNECTICUT HCS: West Haven	3.41	-1.46
1	NORTHAMPTON, MA	7.02	2.49
1	TOGUS, ME†	3.01	-3.17
1	WHITE RIVER JUNCTION, VT†	1.16	-2.98
2	WESTERN NY HCS: Batavia	8.80	-19.14
3	BRONX, NY**	0.00	-11.90
3	HUDSON VALLEY (NY) HCS: Montrose	13.00	-2.03
3	NEW JERSEY HCS: Lyons	11.43	-7.14
4	CLARKSBURG, WV	8.63	0.32
4	COATESVILLE, PA	19.35	-4.35
5	MARTINSBURG, WV	6.50	-0.38
5	MARYLAND HCS: Baltimore	3.01	-0.84
6	SALEM, VA	15.03	-1.47
6	SALISBURY, NC	15.25	-3.18
7	AUGUSTA, GA**	0.00	-36.29
7	CENTRAL AL VETERANS HCS: Tuskegee**	0.00	-20.94
7	TUSCALOOSA, AL† **	0.00	-10.39
8	BAY PINES, FL	4.95	-4.91
8	MIAMI, FL	5.85	-10.90
10	BRECKSVILLE, OH	2.15	-0.65
10	CINCINNATI, OH	6.12	-8.38
10	DAYTON, OH	4.35	-4.39
11	BATTLE CREEK, MI	12.55	-10.82
12	MILWAUKEE, WI	3.50	-0.59
12	NORTH CHICAGO, IL	13.21	-2.82
12	TOMAH, WI	5.63	-4.15
15	EASTERN KS HCS: Topeka	15.30	-1.48
16	CENTRAL AR VETERANS HCS (Little Rock)	14.22	-17.18
16	JACKSON, MS	3.71	-2.26
16	NEW ORLEANS, LA	4.22	-9.14
17	CENTRAL TX VETERANS HCS: Waco	18.22	1.77
18	SOUTHERN AZ HCS (Tucson)*	4.30	4.30
19	EASTERN COLORADO HCS: Denver	6.79	-25.13
19	SHERIDAN, WY**	0.00	-5.98
20	ALASKA HCS (Anchorage)**	0.00	-3.38
20	BOISE, ID	3.25	-0.91
20	PUGET SOUND (WA) HCS: American Lake	9.15	1.00
20	PUGET SOUND (WA) HCS: Seattle	12.74	-2.61
20	ROSEBURG (OR) HCS	6.53	-6.98
21	HILO, HI	12.61	-2.45
21	PALO ALTO (CA) HCS: Menlo Park	26.19	-18.90
22	GREATER LOS ANGELES (CA) HCS: West LA**	0.00	-7.89
23	BLACK HILLS (SD) HCS: Hot Springs*	4.64	4.64
23	CENTRAL IA HCS: Des Moines	2.67	-1.73
23	CENTRAL IA HCS: Knoxville**	0.00	-8.81
23	MINNEAPOLIS, MN† **	0.00	-4.39
ALL VA		318.46	-277.95

Note: No Specialized Intensive Program was located in VISN 9 for these fiscal years.

† For this facility FY 1998 data were used as baseline for computing differences, because FY 1997 data were missing for one or more components.

*No Specialized Intensive PTSD program at this facility was open in the base year.

** No Specialized Intensive PTSD program at this facility was open in the current year.

Table 3-9. Costs for Outpatient Specialized PTSD Programs, by VISN, FY 2003.

VISN	FY 2003					DIFF: FY 2003 -FY 1996		
	# VISITS	# VETERANS TREATED	DIRECT COST	COST PER VISIT	COST PER CAPITA	DIRECT COST	COST PER VISIT	COST PER CAPITA
1	48,710	3,423	\$2,991,176	\$61	\$874	\$250,352	-\$16	-\$277
2	10,519	805	\$1,032,536	\$98	\$1,283	\$469,334	\$20	-\$65
3	39,496	2,464	\$2,450,224	\$62	\$994	\$815,293	-\$15	-\$541
4	24,327	2,286	\$2,699,270	\$111	\$1,181	\$828,504	\$22	-\$180
5	21,308	1,613	\$923,552	\$43	\$573	\$204,789	-\$12	-\$387
6	24,963	2,757	\$1,773,269	\$71	\$643	\$735,401	\$2	-\$91
7	37,963	3,079	\$3,256,244	\$86	\$1,058	\$1,799,272	-\$1	-\$180
8	27,133	2,716	\$2,344,695	\$86	\$863	\$795,324	-\$1	-\$440
9	17,307	2,125	\$1,598,079	\$92	\$752	-\$91,465	-\$38	-\$605
10	26,012	2,082	\$3,483,876	\$134	\$1,673	\$2,960,871	\$39	\$739
11	17,861	1,599	\$1,545,928	\$87	\$967	\$460,077	-\$13	-\$67
12	12,681	797	\$1,313,692	\$104	\$1,648	\$431,582	\$28	\$349
15	29,780	2,233	\$1,977,735	\$66	\$886	\$744,663	\$0	-\$201
16	82,865	7,384	\$5,741,655	\$69	\$778	\$3,049,060	\$0	-\$115
17	26,690	2,268	\$2,158,782	\$81	\$952	\$654,031	\$7	-\$191
18	31,387	3,069	\$2,208,428	\$70	\$720	\$665,372	\$1	-\$228
19	16,396	1,859	\$1,517,454	\$93	\$816	\$490,604	\$5	-\$295
20	50,175	4,197	\$3,389,449	\$68	\$808	\$1,752,693	-\$7	-\$301
21	34,827	2,154	\$2,850,148	\$82	\$1,323	\$823,299	-\$20	-\$309
22	36,855	3,081	\$2,687,215	\$73	\$872	\$1,363,108	-\$16	-\$988
23	28,640	2,664	\$2,827,452	\$99	\$1,061	\$158,305	\$13	-\$303
ALL VA	645,895	54,533	\$50,770,858	\$79	\$931	\$19,360,468	-\$2	-\$255

Note: VISNs 13 & 14 consolidated as VISN 23 in FY 2002.

Note: Direct Costs are All Other Dollars plus total Personal Dollars.

Table 3.10 Costs for Specialized Outpatient PTSD Programs, by Individual Program, FY 2003

VISN	FACILITY	PROGRAM	FY 2003					DIFF: FY 2003 - FY 1996		
			# VISITS	# VETS TREATED	DIRECT COST	COST PER VISIT	COST PER CAPITA	DIRECT COST	COST PER VISIT	COST PER CAPITA
1	BOSTON (MA) HCS: Boston	PCT	7,030	462	\$432,201	\$61	\$935	\$9,983	-\$51	-\$444
1	BOSTON (MA) HCS: Boston	WSDTT	3,799	222	\$327,515	\$86	\$1,475	\$44,278	-\$13	-\$376
1	BOSTON (MA) HCS: Brockton	PCT	5,454	447	\$239,748	\$44	\$536	-\$4,223	-\$26	-\$424
1	BOSTON (MA) HCS: Brockton	SUPT	792	101	\$184,893	\$233	\$1,831	-\$144,622	\$156	\$1,068
1	CONNECTICUT HCS: West Haven*	PCT	11,043	674	\$428,198	\$39	\$635	\$428,198	NC	NC
1	CONNECTICUT HCS: West Haven	SUPT	2,972	247	\$399,309	\$134	\$1,617	\$48,896	\$18	-\$190
1	MANCHESTER, NH	PCT	2,684	198	\$202,552	\$75	\$1,023	\$27,267	\$15	\$60
1	PROVIDENCE, RI	PCT	11,950	924	\$522,743	\$44	\$566	\$101,784	-\$17	-\$319
1	TOGUS, ME**	PCT	0	0	\$0	NC	NC	-\$212,964	NC	NC
1	WHITE RIVER JUNCTION, VT	PCT	2,986	347	\$254,017	\$85	\$732	-\$48,246	\$8	-\$37
2	CANANDAIGUA, NY	PCT	4,600	305	\$379,866	\$83	\$1,245	\$115,033	\$15	\$31
2	SYRACUSE, NY*	PCT	2,500	256	\$336,347	\$135	\$1,314	\$336,347	NC	NC
2	WESTERN NY HCS: Batavia	PCT	3,419	251	\$316,323	\$93	\$1,260	\$17,954	\$3	\$282
3	BRONX, NY	PCT	11,823	507	\$869,347	\$74	\$1,715	\$564,055	\$29	\$268
3	HUDSON VALLEY (NY) HCS: Castle Point*	PCT	1,756	148	\$72,731	\$41	\$491	\$72,731	NC	NC
3	NEW JERSEY HCS: East Orange	PCT	4,428	351	\$462,843	\$105	\$1,319	\$139,096	-\$116	-\$1,546
3	NEW YORK HARBOR HCS: Brooklyn	PCT	9,166	758	\$489,304	\$53	\$646	-\$26,372	\$6	-\$405
3	NEW YORK HARBOR HCS: New York	PCT	12,323	713	\$556,000	\$45	\$780	\$65,784	-\$206	-\$1,238
4	CLARKSBURG, WV**	PCT	0	0	\$0	NC	NC	-\$250,539	NC	NC
4	COATESVILLE, PA	PCT	5,746	414	\$792,738	\$138	\$1,915	\$393,623	\$59	\$839
4	PHILADELPHIA, PA	PCT	9,748	1,013	\$880,924	\$90	\$870	\$478,874	\$9	\$41
4	PITTSBURGH (PA) HCS: Highland Drive	PCT	6,095	660	\$770,498	\$126	\$1,167	\$317,318	\$28	\$176
4	PITTSBURGH (PA) HCS: Highland Drive	SUPT	2,738	213	\$255,110	\$93	\$1,198	-\$110,772	-\$76	-\$893
5	MARYLAND HCS: Baltimore	PCT	6,940	501	\$314,585	\$45	\$628	\$97,376	-\$10	-\$156
5	MARYLAND HCS: Perry Point	PCT	4,867	456	\$237,369	\$49	\$521	\$60,328	-\$21	-\$421
5	WASHINGTON, DC	PCT	9,501	720	\$371,598	\$39	\$516	\$47,085	-\$11	-\$595
6	ASHEVILLE, NC	PCT	3,662	271	\$208,007	\$57	\$768	\$77,230	-\$46	-\$432
6	DURHAM, NC	PCT	4,428	876	\$444,106	\$100	\$507	\$160,163	\$25	-\$70
6	FAYETTEVILLE, NC*	PCT	5,101	262	\$133,807	\$26	\$511	\$133,807	NC	NC
6	HAMPTON, VA	PCT	8,587	924	\$632,719	\$74	\$685	\$375,320	\$32	\$177
6	SALISBURY, NC	PCT	3,185	430	\$354,631	\$111	\$825	-\$11,118	\$16	-\$386
7	ATLANTA, GA	PCT	6,082	445	\$303,076	\$50	\$681	\$13,201	-\$22	-\$733
7	AUGUSTA, GA*	PCT	11,668	860	\$1,096,594	\$94	\$1,275	\$1,096,594	NC	NC
7	BIRMINGHAM, AL	PCT	3,525	608	\$503,131	\$143	\$828	\$212,413	\$46	-\$53
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	5,826	365	\$343,264	\$59	\$940	\$129,110	-\$17	-\$42
7	CHARLESTON, SC	PCT	4,069	437	\$458,837	\$113	\$1,050	\$123,164	\$5	-\$136
7	DUBLIN, GA*	PCT	6,793	375	\$551,342	\$81	\$1,470	\$551,342	NC	NC
7	TUSCALOOSA, AL**	PCT	0	0	\$0	NC	NC	-\$326,552	NC	NC
8	BAY PINES, FL	PCT	6,462	835	\$887,718	\$137	\$1,063	\$530,025	\$27	-\$578
8	MIAMI, FL	PCT	5,608	383	\$383,879	\$68	\$1,002	\$52,664	-\$34	-\$1,221
8	NO.FL/SO.GA VETERANS HCS: Gainesville	PCT	5,187	441	\$384,294	\$74	\$871	\$77,484	-\$47	-\$892
8	SAN JUAN, PR	PCT	3,295	421	\$373,927	\$113	\$888	\$89,020	\$37	\$132
8	TAMPA, FL	PCT	6,581	641	\$314,876	\$48	\$491	\$46,130	-\$6	-\$575

Table 3.10 Costs for Specialized Outpatient PTSD Programs, by Individual Program, FY 2003

VISN	FACILITY	PROGRAM	FY 2003					DIFF: FY 2003 - FY 1996		
			# VISITS	# VETS TREATED	DIRECT COST	COST PER VISIT	COST PER CAPITA	DIRECT COST	COST PER VISIT	COST PER CAPITA
9	HUNTINGTON, WV*	PCT	1,679	241	\$232,202	\$138	\$963	\$232,202	NC	NC
9	LEXINGTON, KY	PCT	3,818	255	\$309,767	\$81	\$1,215	\$40,210	-\$176	-\$470
9	LOUISVILLE, KY	PCT	1,622	291	\$167,202	\$103	\$575	-\$126,188	-\$68	-\$829
9	MEMPHIS, TN	PCT	4,628	550	\$286,759	\$62	\$521	-\$27,155	-\$14	-\$518
9	MIDDLE TN HCS: Murfreesboro**	PCT	0	0	\$0	NC	NC	-\$279,384	NC	NC
9	MIDDLE TN HCS: Nashville**	PCT	0	0	\$0	NC	NC	-\$212,864	NC	NC
9	MOUNTAIN HOME, TN	PCT	5,560	788	\$602,149	\$108	\$764	\$281,714	\$21	\$14
10	BRECKSVILLE, OH*	PCT	11,276	650	\$1,084,470	\$96	\$1,668	\$1,084,470	NC	NC
10	BRECKSVILLE, OH	WSDTT	1,462	100	\$321,720	\$220	\$3,217	\$99,731	\$94	\$1,794
10	CHILLICOTHE, OH	PCT	3,349	582	\$487,464	\$146	\$838	\$186,448	\$65	\$133
10	CINCINNATI, OH*	PCT	5,971	448	\$1,030,602	\$173	\$2,300	\$1,030,602	NC	NC
10	COLUMBUS, OH*	PCT	2,218	206	\$346,312	\$156	\$1,681	\$346,312	NC	NC
10	DAYTON, OH*	PCT	1,736	182	\$213,307	\$123	\$1,172	\$213,307	NC	NC
11	ANN ARBOR (MI) HCS	PCT	3,596	243	\$301,262	\$84	\$1,240	-\$9,845	-\$43	-\$623
11	BATTLE CREEK, MI	PCT	6,577	638	\$444,422	\$68	\$697	\$117,061	-\$33	-\$295
11	DANVILLE, IL	PCT	2,697	290	\$187,614	\$70	\$647	\$2,669	-\$4	-\$48
11	NORTHERN IN HCS: Fort Wayne*	PCT	958	111	\$237,723	\$248	\$2,142	\$237,723	NC	NC
11	NORTHERN IN HCS: Marion	PCT	4,033	340	\$374,907	\$93	\$1,103	\$112,469	-\$6	\$191
12	CHICAGO (IL) HCS: West Side	PCT	8,753	490	\$631,687	\$72	\$1,289	\$213,106	\$14	-\$233
12	HINES, IL	PCT	1,654	93	\$314,215	\$190	\$3,379	-\$17,981	\$77	\$1,742
12	IRON MOUNTAIN, MI**	PCT	0	0	\$0	NC	NC	-\$131,333	NC	NC
12	MADISON, WI*	WSDTT	2,274	214	\$367,790	\$162	\$1,719	\$367,790	NC	NC
15	EASTERN KS HCS: Topeka	PCT	8,827	432	\$637,038	\$72	\$1,475	\$219,210	\$19	\$456
15	KANSAS CITY, MO	PCT	5,221	552	\$424,579	\$81	\$769	\$97,560	-\$23	-\$659
15	POPLAR BLUFF, MO	PCT	2,180	300	\$201,178	\$92	\$671	\$201,178	NC	NC
15	ST. LOUIS, MO	PCT	9,351	718	\$523,695	\$56	\$729	\$218,679	-\$37	-\$348
15	WICHITA, KS	PCT	4,201	235	\$191,245	\$46	\$814	\$8,036	\$3	\$66
16	CENTRAL AR VETERANS HCS (Little Rock)*	PCT	7,098	1,151	\$690,214	\$97	\$600	\$690,214	NC	NC
16	FAYETTEVILLE, AR	PCT	3,456	626	\$322,245	\$93	\$515	\$16,569	-\$33	-\$288
16	GULF COAST (MS) VETERANS HCS (Biloxi)	PCT	10,226	938	\$659,879	\$65	\$703	\$387,879	\$3	\$65
16	HOUSTON, TX	PCT	20,168	1,669	\$1,962,945	\$97	\$1,176	\$1,497,669	\$46	\$447
16	JACKSON, MS	PCT	5,458	818	\$560,246	\$103	\$685	\$202,878	\$7	-\$450
16	NEW ORLEANS, LA	PCT	24,460	1,635	\$869,754	\$36	\$532	\$271,145	-\$19	-\$96
16	NEW ORLEANS, LA	WSDTT	643	59	\$205,345	\$319	\$3,480	-\$151,138	\$90	\$1,150
16	OKLAHOMA CITY, OK	PCT	11,356	545	\$471,027	\$41	\$864	\$133,844	-\$8	\$2
17	CENTRAL TX VETERANS HCS: Austin*	PCT	3,441	295	\$303,447	\$88	\$1,029	\$303,447	NC	NC
17	CENTRAL TX VETERANS HCS: Temple	PCT	4,443	287	\$245,171	\$55	\$854	-\$107,850	-\$71	-\$1,820
17	CENTRAL TX VETERANS HCS: Waco	PCT	4,113	316	\$263,980	\$64	\$835	-\$1,245	\$13	-\$12
17	NORTH TX HCS: Dallas	PCT	7,930	397	\$681,883	\$86	\$1,718	\$193,362	\$7	\$386
17	SOUTH TX VETERANS HCS: San Antonio	PCT	6,763	992	\$664,300	\$98	\$670	\$266,316	\$33	-\$103
18	EL PASO (TX) VETERANS HCS	PCT	6,222	543	\$453,493	\$73	\$835	\$156,638	\$31	\$256
18	NEW MEXICO HCS (Albuquerque)	PCT	13,416	1,410	\$964,361	\$72	\$684	\$478,121	\$1	-\$505
18	PHOENIX, AZ	PCT	6,036	509	\$461,293	\$76	\$906	\$17,380	-\$20	-\$439
18	SOUTHERN AZ HCS (Tucson)	PCT	5,713	614	\$329,281	\$58	\$536	\$13,233	-\$22	-\$327

Table 3.10 Costs for Specialized Outpatient PTSD Programs, by Individual Program, FY 2003

VISN	FACILITY	PROGRAM	FY 2003					DIFF: FY 2003 - FY 1996		
			# VISITS	# VETS TREATED	DIRECT COST	COST PER VISIT	COST PER CAPITA	DIRECT COST	COST PER VISIT	COST PER CAPITA
19	CHEYENNE, WY	PCT	1,861	193	\$188,076	\$101	\$974	-\$66,071	\$2	\$57
19	EASTERN COLORADO HCS: Denver**	PCT	0	0	\$0	NC	NC	-\$284,084	NC	NC
19	EASTERN COLORADO: Pueblo*	PCT	2,500	312	\$119,969	\$48	\$385	\$119,969	NC	NC
19	GRAND JUNCTION, CO	PCT	2,262	336	\$389,775	\$172	\$1,160	\$215,951	\$21	-\$670
19	SALT LAKE CITY (UT) HCS	PCT	9,773	1,019	\$819,634	\$84	\$804	\$504,839	\$16	-\$224
20	BOISE, ID	PCT	3,195	242	\$484,188	\$152	\$2,001	\$35,838	\$56	\$833
20	PORTLAND, OR	PCT	10,137	938	\$835,068	\$82	\$890	\$495,864	-\$15	-\$248
20	PUGET SOUND (WA) HCS: Seattle	PCT	32,943	2,720	\$1,851,377	\$56	\$681	\$1,002,175	-\$6	-\$101
20	SPOKANE, WA*	PCT	3,900	346	\$218,817	\$56	\$632	\$218,817	NC	NC
21	HONOLULU, HI	PCT	6,856	358	\$536,907	\$78	\$1,500	\$192,391	-\$12	\$265
21	NORTHERN CA HCS	PCT	1,089	148	\$263,896	\$242	\$1,783	\$52,848	\$159	\$1,113
21	PALO ALTO (CA) HCS: San Jose	PCT	10,181	578	\$237,744	\$23	\$411	-\$59,220	-\$64	-\$847
21	SAN FRANCISCO, CA	PCT	12,242	941	\$1,321,279	\$108	\$1,404	\$522,074	-\$19	\$96
21	SAN FRANCISCO, CA	SUPT	4,459	149	\$490,322	\$110	\$3,291	\$115,206	\$12	\$533
22	GREATER LOS ANGELES (CA) HCS: East LA	PCT	6,488	517	\$429,602	\$66	\$831	\$28,935	-\$10	-\$249
22	GREATER LOS ANGELES (CA) HCS: West LA*	PCT	1,999	330	\$831,825	\$416	\$2,521	\$831,825	NC	NC
22	LOMA LINDA, CA	PCT	3,363	217	\$193,417	\$58	\$891	-\$135,747	-\$52	-\$814
22	LOMA LINDA, CA	WSDTT	1,934	205	\$275,083	\$142	\$1,342	\$17,482	\$18	-\$938
22	SAN DIEGO (CA) HCS CA	PCT	16,068	1,295	\$526,752	\$33	\$407	\$190,077	-\$41	-\$378
22	SOUTHERN NV HCS (Las Vegas)*	PCT	7,003	534	\$430,535	\$61	\$806	\$430,535	NC	NC
23	BLACK HILLS (SD) HCS: Fort Meade	SUPT	4,578	310	\$449,798	\$98	\$1,451	\$121,536	\$18	-\$127
23	CENTRAL IA HCS: Knoxville*	PCT	2,403	127	\$93,540	\$39	\$737	\$93,540	NC	NC
23	CENTRAL IA HCS: Knoxville**	SUPT	0	0	\$0	NC	NC	-\$411,045	NC	NC
23	IOWA CITY, IA	PCT	4,094	594	\$410,125	\$100	\$690	\$74,186	\$12	-\$93
23	MINNEAPOLIS, MN	PCT	9,946	904	\$1,041,410	\$105	\$1,152	\$523,807	\$35	\$74
23	NE-WESTERN IA HCS: Lincoln	PCT	2,264	218	\$267,714	\$118	\$1,228	-\$37,936	-\$18	-\$955
23	NE-WESTERN IA HCS: Omaha	PCT	4,170	355	\$406,998	\$98	\$1,146	\$128,781	-\$10	-\$519
23	SIOUX FALLS, SD	PCT	1,185	164	\$157,867	\$133	\$963	-\$28,997	-\$84	-\$1,091
23	ST. CLOUD, MN**	PCT	0	0	\$0	NC	NC	-\$305,567	NC	NC
ALL VA			645,895	54,533	\$50,770,858	\$79	\$931	\$19,360,468	-\$2	-\$253

Note: Direct Costs are All Other Dollars plus total Personal Dollars

NC=Not calculated because one or more of the components were missing.

* The Specialized Outpatient PTSD program at this facility was not open in the base year

** The Specialized Outpatient PTSD program at this facility was closed for all of the current fiscal year

Table 3-11. Costs for Specialized Intensive PTSD Programs, by VISN, FY 2003.

VISN	FY 2003					DIFFERENCE: FY 2003- FY1997		
	# OF DAYS OF TREATMENT	# OF ADMISSIONS	DIRECT COSTS	COST PER DIEM	COST PER CAPITA	DIRECT COSTS	COST PER DIEM	COST PER CAPITA
1	11,204	368	\$1,081,562	\$97	\$2,939	-\$188,789	\$11	-\$86
2	3,658	291	\$583,074	\$159	\$2,004	-\$680,679	-\$161	-\$3,262
3	12,885	296	\$1,600,222	\$124	\$5,406	-\$1,296,590	-\$29	-\$133
4	14,476	227	\$1,989,669	\$137	\$8,765	\$174,588	\$21	\$3,938
5	17,381	202	\$749,008	\$43	\$3,708	\$53,152	-\$27	\$629
6	9,531	268	\$2,014,474	\$211	\$7,517	\$59,672	-\$5	-\$731
7**	0	0	\$0	NC	NC	-\$3,890,305	NC	NC
8	8,882	157	\$996,023	\$112	\$6,344	-\$535,860	-\$83	-\$4,838
10	4,863	124	\$1,006,006	\$207	\$8,113	-\$468,323	\$76	\$1,319
11	8,145	381	\$993,261	\$122	\$2,607	-\$320,395	-\$31	-\$1,861
12	17,804	367	\$1,599,025	\$90	\$4,357	-\$54,952	-\$11	\$253
15	6,904	90	\$1,075,900	\$156	\$11,954	\$154,421	\$72	\$3,653
16	11,433	346	\$1,553,326	\$136	\$4,489	-\$1,620,956	-\$116	-\$4,044
17	6,113	100	\$1,134,651	\$186	\$11,347	\$309,215	\$70	\$4,948
18*	1,392	80	\$346,501	\$249	\$4,331	\$346,501	NC	NC
19	3,077	128	\$574,083	\$187	\$4,485	-\$1,415,833	-\$40	-\$6,271
20	12,447	505	\$2,471,444	\$199	\$4,894	-\$337,116	\$61	\$893
21	15,477	274	\$3,141,988	\$203	\$11,467	-\$320,477	\$21	\$2,058
22**	0	0	\$0	NC	NC	-\$656,952	NC	NC
23	4,255	98	\$484,069	\$114	\$4,939	-\$551,316	\$5	-\$781
ALL VA	169,927	4,302	\$23,394,284	\$138	\$5,438	-\$11,240,995	-\$13	-\$321

Note: Direct Costs are All Other Dollars plus total Personal Dollars.

NC=Not calculated because one or more of the components were missing.

* No Specialized Intensive PTSD program in this VISN was open in the base year.

** No Specialized Intensive PTSD program in this VISN was open in the current fiscal year.

Table 3-12. Costs for Specialized Intensive PTSD Programs, by VA Facility, FY 2003.

VISN	FACILITY	FY 2003					DIFFERENCE: FY 2003 - FY 1997		
		#Of DAYS OF TREATMENT	# Of ADMISSIONS	DIRECT COSTS	COST PER DIEM	COST PER CAPITA	DIRECT COSTS	COST PER DIEM	COST PER CAPITA
1	CONNECTICUT HCS: West Haven	3,035	28	\$236,042	\$78	\$8,430	-\$28,979	\$1	\$2,669
1	NORTHAMPTON, MA	5,607	83	\$504,278	\$90	\$6,076	\$250,232	\$54	\$3,745
1	TOGUS, ME†	2,042	213	\$246,587	\$121	\$1,158	-\$180,642	\$9	-\$1,079
1	WHITE RIVER JUNCTION, VT†	520	44	\$94,655	\$182	\$2,151	-\$229,400	-\$351	-\$2,228
2	WESTERN NY HCS: Batavia	3,658	291	\$583,074	\$159	\$2,004	-\$680,679	-\$161	-\$3,262
3	BRONX, NY**	0	0	\$0	NC	NC	-\$752,094	NC	NC
3	HUDSON VALLEY (NY) HCS: Montrose	5,954	136	\$791,821	\$133	\$5,822	-\$126,039	-\$5	\$723
3	NEW JERSEY HCS: Lyons	6,931	160	\$808,401	\$117	\$5,053	-\$418,457	-\$15	-\$1,175
4	CLARKSBURG, WV	3,428	75	\$570,697	\$166	\$7,609	\$83,939	-\$107	\$4,229
4	COATESVILLE, PA	11,048	152	\$1,418,972	\$128	\$9,335	\$90,649	\$32	\$3,610
5	MARTINSBURG, WV	14,915	129	\$462,506	\$31	\$3,585	\$57,016	-\$15	\$289
5	MARYLAND HCS: Baltimore	2,466	73	\$286,503	\$116	\$3,925	-\$3,864	-\$165	\$1,106
6	SALEM, VA	3,723	119	\$943,291	\$253	\$7,927	\$60,145	\$37	\$379
6	SALISBURY, NC	5,808	149	\$1,071,183	\$184	\$7,189	-\$474	-\$33	-\$1,741
7	AUGUSTA, GA**	0	0	\$0	NC	NC	-\$2,224,614	NC	NC
7	CENTRAL AL VETERANS HCS: Tuskegee**	0	0	\$0	NC	NC	-\$993,109	NC	NC
7	TUSCALOOSA, AL† **	0	0	\$0	NC	NC	-\$672,583	NC	NC
8	BAY PINES, FL	3,950	92	\$444,925	\$113	\$4,836	-\$134,746	-\$51	-\$2,791
8	MIAMI, FL	4,932	65	\$551,098	\$112	\$8,478	-\$401,114	-\$109	-\$7,132
10	BRECKSVILLE, OH	432	19	\$202,465	\$469	\$10,656	-\$12,860	\$405	\$6,170
10	CINCINNATI, OH	2,296	42	\$491,140	\$214	\$11,694	-\$331,772	-\$12	\$3,930
10	DAYTON, OH	2,135	63	\$312,401	\$146	\$4,959	-\$123,691	\$45	-\$1,963
11	BATTLE CREEK, MI	8,145	381	\$993,261	\$122	\$2,607	-\$320,395	-\$31	-\$1,861
12	MILWAUKEE, WI	6,466	30	\$227,392	\$35	\$7,580	-\$22,671	-\$14	-\$6,313
12	NORTH CHICAGO, IL	7,601	252	\$1,018,587	\$134	\$4,042	\$97,394	\$19	\$692
12	TOMAH, WI	3,737	85	\$353,045	\$94	\$4,153	-\$129,676	-\$51	-\$235
15	EASTERN KS HCS: Topeka	6,904	90	\$1,075,900	\$156	\$11,954	\$154,421	\$72	\$3,653
16	CENTRAL AR VETERANS HCS (Little Rock)	6,736	186	\$929,381	\$138	\$4,997	-\$1,000,835	-\$111	-\$8,045
16	JACKSON, MS	2,287	96	\$284,372	\$124	\$2,962	-\$120,058	-\$50	-\$273
16	NEW ORLEANS, LA	2,410	64	\$339,573	\$141	\$5,306	-\$500,064	-\$195	-\$3,175
17	CENTRAL TX VETERANS HCS: Waco	6,113	100	\$1,134,651	\$186	\$11,347	\$309,215	\$70	\$4,948
18	SOUTHERN AZ HCS (Tucson)*	1,392	80	\$346,501	\$249	\$4,331	\$346,501	NC	NC
19	DENVER, CO	3,077	128	\$574,083	\$187	\$4,485	-\$1,041,837	-\$101	-\$10,073
19	SHERIDAN, WY**	0	0	\$0	NC	NC	-\$373,996	NC	NC
20	ALASKA HCS (Anchorage)**	0	0	\$0	NC	NC	-\$286,628	NC	NC
20	BOISE, ID	678	19	\$386,811	\$571	\$20,358	\$20,193	\$158	\$5,083
20	PUGET SOUND (WA) HCS: American Lake	4,836	120	\$563,640	\$117	\$4,697	\$126,821	\$66	\$2,814
20	PUGET SOUND (WA) HCS: Seattle	3,453	244	\$1,057,501	\$306	\$4,334	\$81,417	\$64	\$933
20	ROSEBURG (OR) HCS	3,480	122	\$463,491	\$133	\$3,799	-\$278,919	-\$91	-\$2,337
21	HILO, HI	2,149	36	\$816,386	\$380	\$22,677	\$55,376	\$186	\$14,222
21	PALO ALTO (CA) HCS: Menlo Park	13,328	238	\$2,325,603	\$174	\$9,771	-\$375,852	-\$4	\$54

Table 3-12. Costs for Specialized Intensive PTSD Programs, by VA Facility, FY 2003.

VISN	FACILITY		FY 2003				DIFFERENCE: FY 2003 - FY 1997		
		#Of DAYS OF TREATMENT	# Of ADMISSIONS	DIRECT COSTS	COST PER DIEM	COST PER CAPITA	DIRECT COSTS	COST PER DIEM	COST PER CAPITA
22	GREATER LOS ANGELES (CA) HCS: West LA**	0	0	\$0	NC	NC	-\$656,952	NC	NC
23	BLACK HILLS (SD) HCS: Hot Springs*	2,618	54	\$306,806	\$117	\$5,682	\$306,806	NC	NC
23	CENTRAL IA HCS: Des Moines	1,637	44	\$177,263	\$108	\$4,029	-\$148,101	-\$28	-\$901
23	CENTRAL IA HCS: Knoxville**	0	0	\$0	NC	NC	-\$398,541	NC	NC
23	MINNEAPOLIS, MN† **	0	0	\$0	NC	NC	-\$311,479	NC	NC
ALL VA		169,927	4302	\$23,394,284	\$138	\$5,438	-\$11,240,995	-\$13	-\$321

Note: Direct Costs are All Other Dollars plus total Personal Dollars.

NC=Not calculated because one or more of the components were missing.

† For this facility FY 1998 data were used as baseline for computing differences, because FY 1997 data were missing for one or more components.

* No Specialized Intensive PTSD program at this facility was open in the base year.

** No Specialized Intensive PTSD program at this facility was open in the current fiscal year.

PART IV: OUTCOME MONITORING OF SPECIALIZED INTENSIVE PTSD PROGRAMS

System-wide monitoring of health care outcomes has become an increasingly prominent feature of health care delivery in America, and will eventually constitute a cornerstone of the operation of the Department of Veterans Affairs health care system (Kizer, 1995, 1996; Veterans Health Administration, 1996). As our health care system has undergone a period of accelerating and unprecedented change, public officials, health care professionals, and the public have demanded objective evidence of the continuing quality and value of the care provided. Although controversial, health care “report cards” have been developed (and made public) by an increasing number of health care systems. The treatment of veterans suffering from Posttraumatic Stress Disorder (PTSD) due to their military experience is one of the highest VA priorities. In an earlier report (Fontana & Rosenheck, 1997b), we described our development of a report card for the treatment outcomes of the specialized intensive PTSD programs (SIPPs), as specified in VHA Directive 96-051, *Veterans Health Administration Special Emphasis Programs*. Readers who are interested in the technical aspects of the development of the report card should consult this earlier report (Fontana & Rosenheck, 1997b).

VISNs have been very active since FY 1996 in opening, closing and redesigning their intensive PTSD programs. At the same time, there has been increased interest in VA in comparing performance during the most recent fiscal year to a reference year. We use FY 1996 as the reference year for all outcome indices except Work. Due to a change in the assessment of Work from dollars earned to days worked, the earliest that we have data available for the latter measure is FY 1998. FY 1998, therefore, becomes the reference year for days worked. Similarly, we began collecting data concerning veterans’ satisfaction with their treatment in FY 1997. That fiscal year, therefore, becomes the reference year for satisfaction.

The changes in program design have made it infeasible for us to continue to compare performance across fiscal years at the program level. Beginning with the Long Journey Home VII report (Fontana, Rosenheck et al., 1999), therefore, we shifted our presentation of performance data from the program level to the station level. We continue to present performance data at the VISN level, however, as in the past. There was a reorganization of VISNs in FY 2002 such that VISNs 13 and 14 were consolidated and their designation changed to VISN 23.

In response to requests from the field, we continue to present the baseline and follow-up means in addition to the risk-adjusted follow-up means for the current fiscal year for each station and VISN. We hope that this expanded presentation of the outcome data to include baseline and follow-up means enhances their utility for program planning.

In the sections that follow we describe the: (1) programs and time-period surveyed, (2) the stations surveyed and the adequacy of the data collected, (3) conditioning of the data to remove unwanted artifacts, (4) methods of risk-adjustment, (5) definition of the specific measures of outcome and the significance of these outcomes nationwide, (6) patient satisfaction

with specialized PTSD treatment nationwide, (7) identification of stations whose outcomes or satisfaction are significantly better or worse than average, (8) deriving a report card for outcomes by synthesizing several indices into a single index, and (9) limitations to the monitoring methodology and data.

Programs and Time-Period Surveyed

The monitoring protocol covers all *intensive* specialized PTSD programs: inpatient, residential and day hospitals (outpatient). The types of residential and inpatient programs that are included are the Evaluation and Brief Treatment PTSD Units (EBTPUs), PTSD Residential Rehabilitation Programs (PRRPs), PTSD Domiciliary Programs (PDPs) and Specialized Inpatient PTSD Units (SIPUs), including a Women's Trauma Recovery Program. More detailed descriptions of these programs can be found in previous NEPEC reports (Fontana, Rosenheck et al., 1993, 1995). Another change that we instituted in the Long Journey Home VII and subsequent reports is the definition of the time-period surveyed. In order to represent performance most accurately within a given fiscal year, we define the relevant performance to consist of clinical *outcomes* that occurred during the index fiscal year. The veterans comprising the sample for this report, therefore, are those whose four-month follow-up assessment after discharge was due during FY 2003. In all, there were 3,350 veterans who were enrolled in the monitoring protocol and were due for follow-up during FY 2003. Of these, 2,610 (78%) were actually followed-up.

Stations Surveyed and Adequacy of Data Collection

A total of 37 stations were surveyed. Confidence in conclusions drawn from our analyses rests upon the representativeness of the data upon which they are based. Representativeness is determined by the percentage of veterans who are followed up. The Special Emphasis Program goal for representativeness is a minimum of a 50% follow-up (VHA Directive 96-051, Program Measure #1). The number due for follow-up, the number actually followed up, and the percentage followed up are presented in Table 4-1 for each station. In FY 2003, all 37 stations met the minimum goal of 50% and, therefore, were retained for analyses of outcomes and satisfaction.

Conditioning the Data

Several procedures are in place to ensure that the data are maximally complete and accurate. The first step for a program new to the monitoring protocol is to designate one person (an evaluation director) who has overall responsibility for the implementation and ongoing operation of the protocol by program staff, and another person (a data manager) who has daily responsibility for the data collection and the submission of data to NEPEC. Each of these persons is sent a written manual describing the evaluation procedures, and the manual is

reviewed with them orally by a member of the NEPEC staff. When data are submitted to NEPEC, they are put through a series of computerized screens for accuracy of answers and for timeliness of submission. Letters explaining errors and identifying overdue forms are mailed to the data manager of each program each week. NEPEC staff edits the data with the correct information as they are returned by the field staff. In order to maximize the quality and quantity of data, NEPEC staff follow up these letters with telephone calls to data managers and evaluation directors as needed. In cases where problems in participation in the monitoring protocol persist, letters detailing the problems are sent to medical center and/or VISN authorities requesting their assistance.

Correcting for Regression to the Mean

Once the data have been made maximally complete and accurate, one other step is necessary to condition them for analysis. Regression to the mean is one of the artifacts potentially affecting longitudinal data. Regression to the mean refers to the fact that scores at time 1 are often found to be closer to the mean at time 2, due to the less than perfect test-retest reliability of the measuring instrument. In situations where people start out more deviantly than the norm (as is most often the case with psychiatric patients entering treatment), some of the movement toward the norm over time may be due to regression to the mean rather than to the treatment programs themselves. Data can be examined to determine if substantial regression to the mean has occurred by correlating the scores at time 1 with the change from time 1 to time 2. If the correlation is statistically significant, substantial regression to the mean has occurred (cf., Speer, 1992). Examination of the monitoring data in this manner reveal that they are affected by regression to the mean. We remove the component of change attributable to regression to the mean, therefore, by transforming raw scores into “true scores” using the method of Jacobson & Truax (1991). True scores are derived by adjusting raw scores for the test-retest reliability of the measuring instrument according to the formula

$$T_j = \text{Rel}(X_j) + (1 - \text{Rel})M$$

where T represents the true score, Rel is the test-retest reliability, X is the raw score, and M is the mean.

Values for the test-retest reliabilities were obtained from an earlier study of specialized outpatient treatment for PTSD (Fontana & Rosenheck, 1996b). In that study, a stabilization period of symptoms and social functioning was observed beginning four months after the initiation of treatment. The correlations across a four-month interval during this period of no change in the levels of symptoms or social functioning were used as the test-retest reliabilities. All analyses were performed on true scores, thereby maximizing the sensitivity of the analyses to programmatically induced change.

Determining the Quality of Outcomes

VHA Directive 96-051 specifies outcome goals for PTSD, substance abuse, and work in Population Measures 1, 2 and 3. We have introduced some technical modifications to the determination of whether these goals are met so that the methods used are consistent with the methods used elsewhere in the National Mental Health Program Performance Monitoring System (Rosenheck & DiLella, 1998; Kasproff et al., 1997; Seibyl et al., 1997). In addition, we have added violence as Population Measure 6, because it is the single most important disruption to social functioning. These changes have been instituted with the approval of the Clinical Quality Improvement Specialist in the Office of Performance and Quality, VA Headquarters.

As with the vast majority of medical conditions, absolute outcome standards have not been established for the treatment of PTSD. In the absence of such standards, we use the performance of the median VISN and median station nationwide as the reference point for evaluating the performance of the other VISNs and stations. For each clinical outcome and patient satisfaction, the risk-adjusted value for the median VISN or station is adopted as the reference point. The SEP goal for each measure of clinical outcome is that the outcome not be significantly worse than that of the median, or reference, VISN or station.

Risk Adjustment

A major challenge for all outcome monitoring efforts is posed by the inevitable differences among veterans treated at various stations at the time of admission. Such differences in sociodemographic and clinical characteristics can have a substantial influence on the amount of change that occurs during treatment. In addition, our inspection of prior data suggested that differences in the conditions under which data are collected at follow-up might affect outcomes differentially across stations. As of January 8, 1999 we modified our follow-up instrument so as to include questions concerning the conditions under which the data were collected. We found that if the follow-up data were collected by clinicians associated with the programs either in face-to-face contact or over the telephone, veterans' reports of their outcomes and their satisfaction were significantly higher than if the data were collected by mail or by face-to-face contact or telephone by nonclinicians who were associated with the programs. We recommend, therefore, that follow-up data **not** be collected by clinicians who are associated with the programs.

As a result of these influences, outcomes should not be compared simply and directly *across* VISNs or stations without adjusting for these influences. The procedure for doing this is commonly referred to as risk adjustment (Iezzoni, 1995). Thus, the average outcome and satisfaction at each individual VISN or station is compared to that of the median VISN or station, after statistical adjustment for differences in patient characteristics at admission and conditions of follow-up data collection using multivariate methods. The significance levels for individual VISNs or stations performing significantly better or worse than their respective median counterparts are identified for each outcome measure and satisfaction.

Data Analytic Strategy

The first step in the analytic process is to evaluate the significance of the change from baseline to follow-up for each of the outcome indices for each station. Paired-comparison t-tests are performed on the true-scored data to determine the significance of these changes. The means themselves and the significance of the differences between admission and four-month follow-up are presented in Tables 4-2 through 4-13.

The next step is to regress the scores at four-months follow-up on the scores at admission to produce a set of residual outcome scores. These residual scores represent outcomes adjusted for admission levels. Residual scores for each of the six outcome variables are then correlated with 25 different sociodemographic and clinical characteristics at the time of admission and with an index ordering the conditions of data collection at follow-up.

In the data set for this report, 11 characteristics were found to be correlated significantly ($p < .05$) with the residual scores for two or more of the outcome variables and, therefore, were retained for use as risk-adjusters in subsequent analyses. These characteristics are veterans' African American or Latino ethnicity, marital status, education, distance of residence from the medical center, lifetime history of incarceration, current employment status, number of comorbid psychiatric disorders, medical problems, prescription of medications at admission, and the follow-up data having been collected by a clinician associated with the program. Eleven characteristics were found to be correlated significantly with the satisfaction ratings and were retained for use as risk-adjusters for analyses involving satisfaction: age, African American ethnicity, marital status, distance of residence from the medical center, lifetime history of incarceration, having received hostile or friendly fire, having participated in atrocities, number of comorbid psychiatric disorders, service connection for PTSD, prescription of medications at admission, and a prior history of hospitalization for psychiatric or substance abuse problems.

The third step in the analyses is to use analysis of covariance to generate risk-adjusted follow-up means for VISNs and stations for each clinical outcome and patient satisfaction. True-scored follow-up means, adjusted for risk factors, are presented for the six outcome indices for each VISN and station in Tables 4-2 through 4-13.

Then multiple regression analysis is employed to compare the outcomes and satisfaction for all VISNs or stations to that of the median VISN or station for each outcome and satisfaction. This analysis produced a regression coefficient for each VISN or station, representing the number of scale points that that VISN or station deviated from its median counterpart after risk adjustment. The scale points for clinical outcomes and satisfaction are presented in the metrics of the instruments used to measure them. The regression coefficients are presented for outcomes in Tables 4-2 through 4-13 and for satisfaction in Tables 4-16 and 4-17 as the "Deviation of the Mean from the Median". Significance levels represent the probability that each deviation could have occurred by chance. For ease of identification, those VISNs and stations whose outcomes or satisfaction were significantly worse than that of their median counterpart are marked by an "X". As noted above, outcomes which were significantly worse than that of the median for the

Short Mississippi Scale (Tables 4-2 and 4-3), the ASI Composite for Alcohol Abuse (Tables 4-6 and 4-7), the ASI Composite for Drug Abuse (Tables 4-8 and 4-9), or for Work (Tables 4-12 and 4-13) do not meet the goals for Population Measures 1, 2 and/or 3 in VHA Directive 96-051 as modified above.

Conducting the monitoring protocol over several years has enabled us to track outcomes over time. We track the changes in outcomes from baseline to follow-up from 1997 through 2003. The patterns of these changes are graphed in Figures 1-3.

Measures of Outcome

The baseline data for outcomes monitoring are collected by a self-report questionnaire at the time of admission to specialized PTSD treatment, and follow-up data by a parallel questionnaire four months after discharge. (Details of the monitoring protocol, the quality control procedures at NEPEC, and copies of the data collection forms can be found in Fontana and Rosenheck, 1997b.) Outcome is defined as the *change* in symptoms and functioning from the month preceding admission to the month preceding the four-month follow-up and is assessed in five domains: 1) PTSD symptoms, 2) alcohol abuse, 3) drug abuse, 4) violence, and 5) work.

PTSD Symptoms

Due to their particular significance in these specialized programs, PTSD symptoms are measured by two instruments: the Short Form of the Mississippi Scale for Combat-Related PTSD that has been validated in a large sample of outpatients (Fontana & Rosenheck, 1994) and a four-item PTSD Scale that has been specially constructed for program monitoring to assess: 1) intrusive thoughts, flashbacks or nightmares, 2) avoidance of reminders of the war, 3) feelings of numbness or emotional distance from other people, and 4) sleep disturbances, irritability or hyperarousal (Cronbach alpha=0.67). For the SIPPs nationally, there was significant improvement in PTSD ($p<.0001$) as measured by both instruments. The true-scored Short Mississippi Scale decreased by 1.88 points (4.77%) from 39.42 to 37.54; and the true-scored PTSD Scale decreased by 1.18 points (7.07%) from 16.68 to 15.50. Both decreases are significant at $p<.0001$. The average length of stay in the SIPPs nationally was 45.20 days ($sd=32.13$). Both of these changes in PTSD symptoms were correlated significantly ($p<.05$) with length of stay: $r=-.04$ for the Short Mississippi Scale and $r=-.05$ for the PTSD Scale.

Alcohol Abuse and Drug Abuse

Alcohol abuse and drug abuse are measured by the composite indices from the Addiction Severity Index (McLellan et al., 1985), a widely used and well-validated measure of substance abuse outcomes. Nationally, there was a significant decrease in alcohol abuse ($p<.0001$) and drug abuse ($p>.0001$). The true-scored alcohol abuse composite decreased by .01 points (8.33%) from .12 to .11; the true-scored drug abuse composite also decreased by .01

points (20%) from .05 to .04. Neither change in substance abuse was correlated significantly with length of stay: $r=-.02$ for alcohol abuse and $r=-.03$ for drug abuse.

Violence

Violence is measured by four items that were adapted from the National Vietnam Veterans Readjustment Study (Kulka et al., 1990): 1) destruction of property, 2) threatening someone with physical violence without a weapon, 3) threatening someone with a weapon, and 4) physically fighting with someone (Cronbach alpha=0.71). Nationally, the true-scored violence scale decreased significantly ($p<.0001$) by .60 points (44.11%) from 1.36 to 0.76. The decrease in violence was not correlated significantly with length of stay ($r=-.02$).

Work

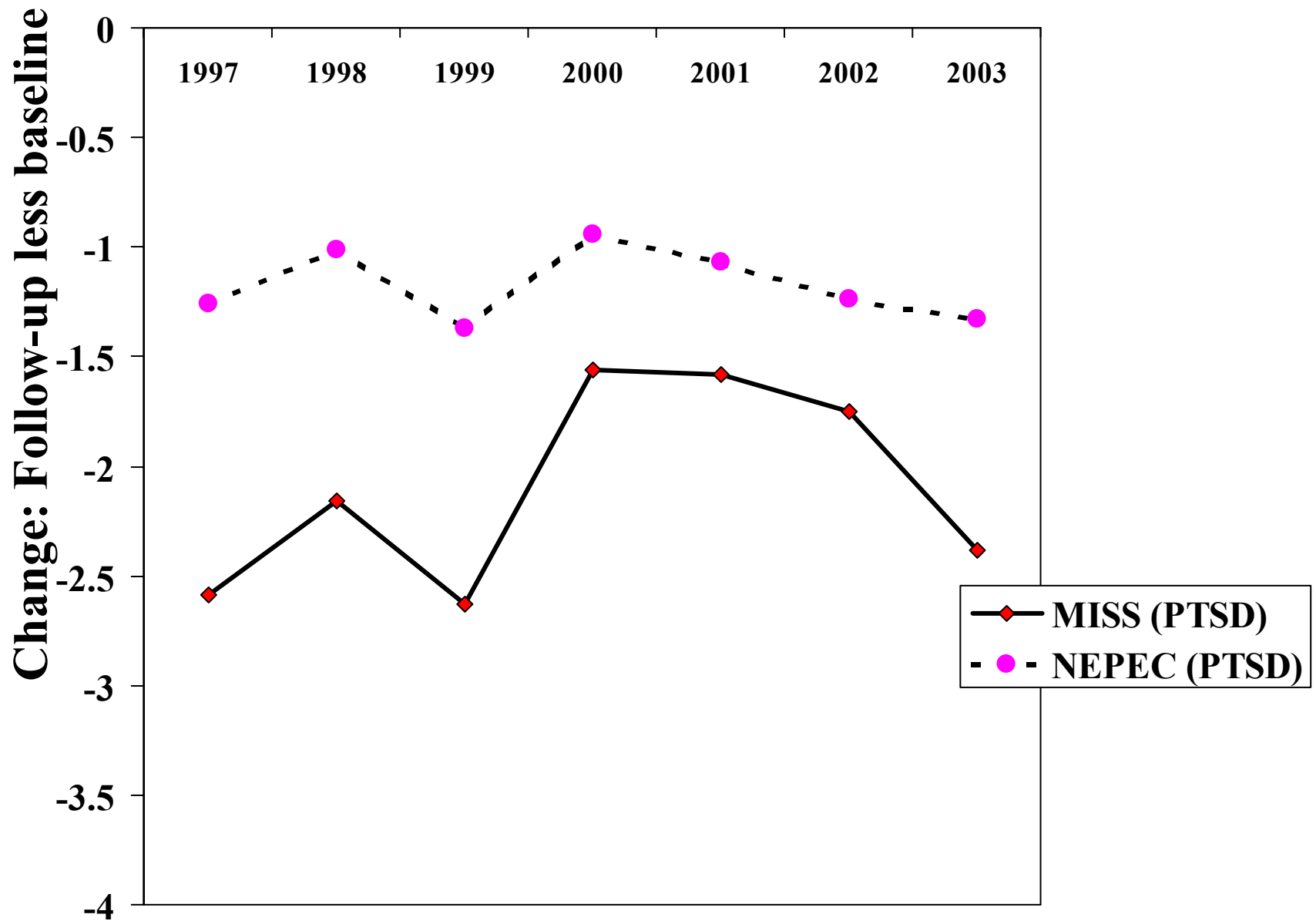
Work is measured as the number of days employed for pay during the 30 days preceding the interview. Nationally, there was a significant *decrease* in true-scored work outcomes ($p<.0001$). The true-scored number of days worked during the past 30 days decreased by 1.28 (43.39%) from 2.95 to 1.67 days. The decrease in days worked was not correlated significantly with length of stay ($r=-.03$).

Patterns of Change over Time

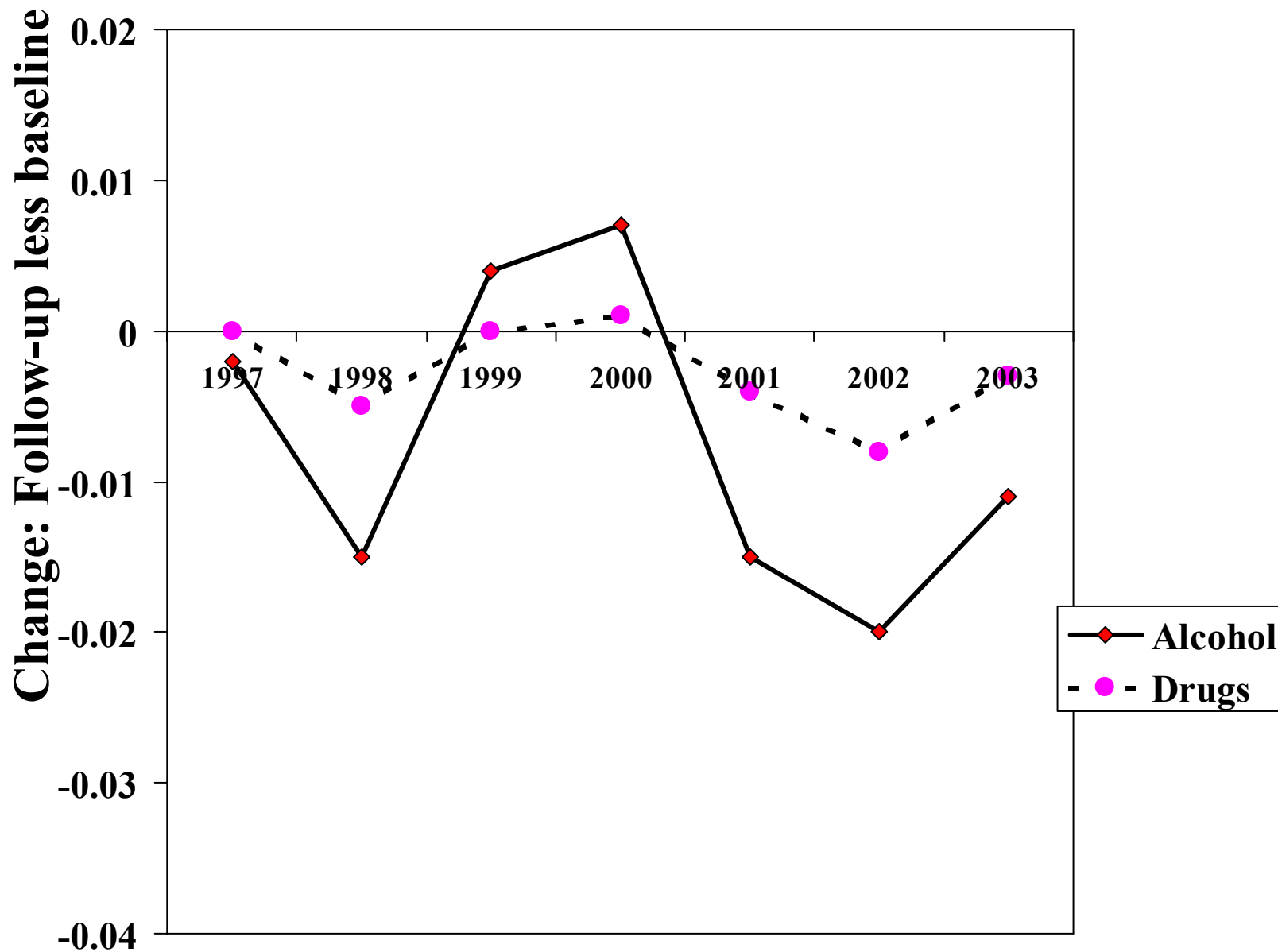
Outcomes were represented by the differences in clinical status between follow-up four months after discharge and admission. For each outcome measure, the change in this difference was evaluated across time by including as covariates the admission level of the measure as well as all background factors that were found to be related significantly to fiscal year. The changes in outcome scores from FY 1997 through FY 2003 are presented in Figures 1-3. The scales on the vertical (Y) axes show that the outcomes are quite modest in absolute terms, although for each measure there is a statistically significant difference from admission to follow-up across the years. It should be noted that a negative outcome score for measures of PTSD, substance use, and violence indicates a reduction in symptoms and is therefore desirable; while a negative outcome score for work indicates a reduction in days of employment and is therefore undesirable.

Figure 1 presents the changes in PTSD symptoms. For both the Mississippi and NEPEC measures, there is a small but significant decline in the size of the amelioration of PTSD symptom severity over the years, particularly for the years since 2000. The changes in alcohol and drug use can be seen in Figure 2. There is a significant and largely consistent trend for an increasing improvement in alcohol and drug use from 2000 through 2002. Outcomes worsened somewhat, however, in 2003. In figure 3, the outcomes for violence have shown a steady improvement over the years, with a small decline in improvement in 2000. This decline was reversed in subsequent years. Outcomes for work decreased significantly from 1997 to 1999, with a stabilization of outcomes beginning subsequently.

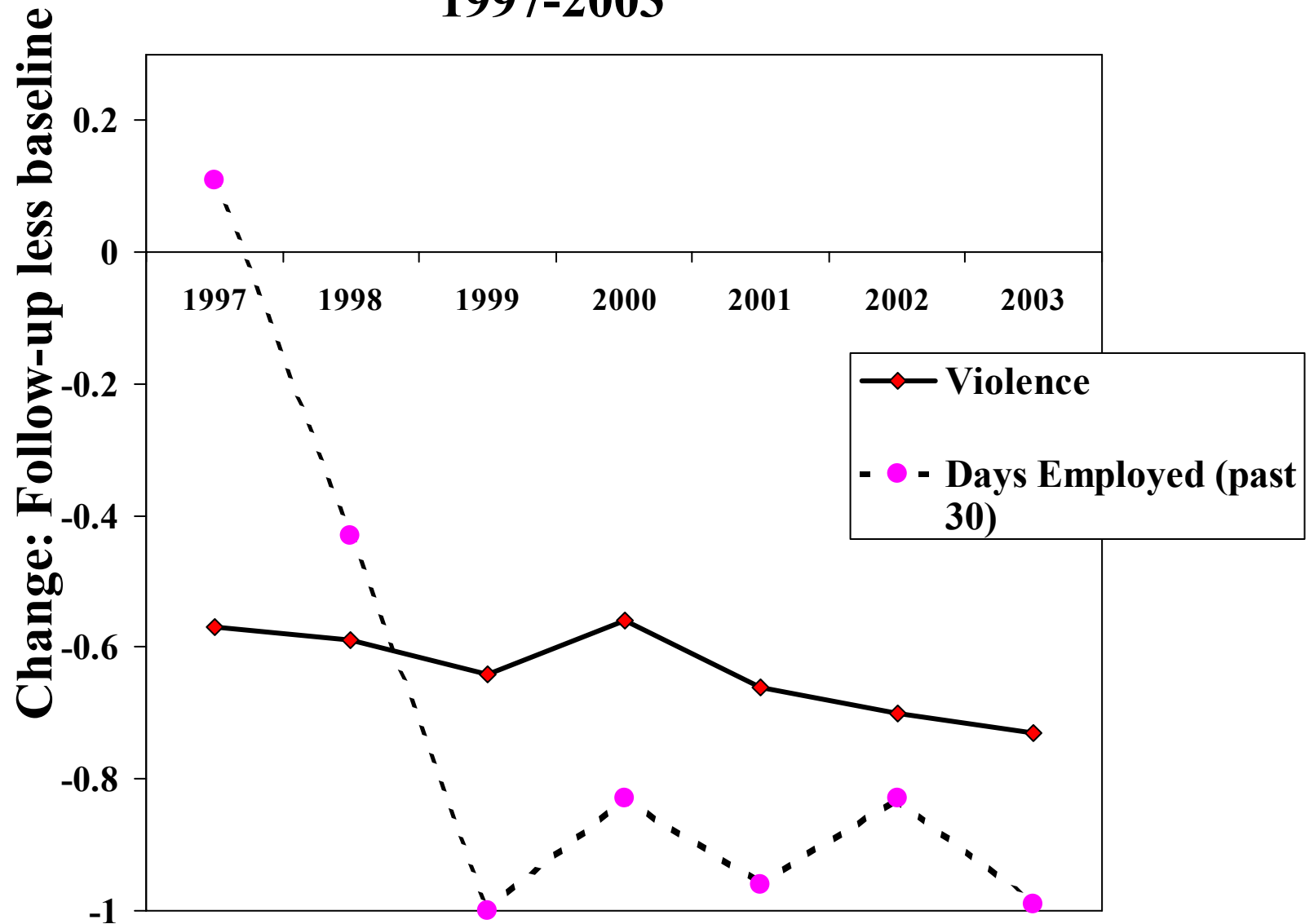
Changes in PTSD Outcome Scores: 1997-2003



Changes in ASI Outcome Scores: 1997-2003



Changes in Violence Scores and Days Employed: 1997-2003



Satisfaction with Services

The follow-up questionnaire was modified in June 1996 to permit the monitoring of veterans' satisfaction with the clinical services received. Four items, scored on 4-point and 5-point Likert scales, cohered as a highly internally consistent cluster (Cronbach alpha=.84). These items, based on the work of Attkisson et al. (1983), asked the veterans how satisfied they were with the care they received from the specialized PTSD program, how they would rate the care they received from the specialized PTSD program, whether they would choose to go to the specialized PTSD program again if they needed treatment, and whether they would recommend the specialized PTSD program to other veterans if they needed treatment. Satisfaction scores can range from 4 to 18. A mid-point score of 11 represents equally satisfied and dissatisfied ratings. Nationally, veterans gave the SIPP a rating of 16.02, indicating that overall they were satisfied with services. Satisfaction was correlated significantly ($p<.005$) with length of stay ($r=.06$).

Satisfaction is an important dimension of quality of care in its own right. Only 10% of the explained variance in satisfaction ratings can be attributed to improved outcomes (Fontana & Rosenheck, 1999). Satisfaction and outcomes, therefore, should be considered as largely separate dimensions of quality of care.

A Report Card for Outcomes

Although performance assessment of PTSD treatment clearly requires consideration of multiple outcome domains, the complex results do not allow summary assessment of the performance of each station. The six outcome variables are therefore combined into a single index, analogous to the cumulative grade-point average, on a report card of outcome performance. To accomplish this synthesis, we had to resolve two questions: 1) how to combine the regression coefficients when they were derived from variables that were measured with different metrics, and 2) what weight to give the regression coefficients for the different variables in combining them.

We resolved the first problem by using the *standardized* regression coefficients for deviations from the median VISN or station. This converts the different metrics for each variable into the common metric of standard scores. In addition, this method has the advantage of taking the actual sample sizes and variabilities of the individual VISNs and stations into account. Additionally, we reversed the sign of the coefficient for Work so that the direction was the same as for symptoms, substance abuse and violence.

We resolved the second problem by giving the combined value of the two PTSD symptom outcomes equal weight to the combined value of the other four outcomes. This weighting was decided upon after consultation with national experts in PTSD treatment and VHA headquarters. There was a consensus that while a diverse range of outcomes was desirable, the specialized nature of these programs as PTSD programs warranted a heavier emphasis on the

outcomes for PTSD symptoms than for other outcomes.

The standardized coefficients for the Short Mississippi Scale and the NEPEC PTSD Scale were thus summed and averaged, as were the standardized coefficients for Alcohol Abuse, Drug Abuse, Violence and Work. These two averages were summed to produce the Standardized Combined Mean for all the outcomes. Finally, the Standardized Combined Mean was ranked, with the lowest ranks assigned to VISNs and stations with the best outcomes and the highest ranks assigned to those with the worst outcomes. The ranks constitute a report card of the goodness of VISNs' and stations' outcome performance represented as a single index. These data can be found in Tables 4-14 and 4-15.

A Report Card for Satisfaction

The mean risk-adjusted satisfaction ratings are presented in Table 4-16 by VISN and in Table 4-17 for stations. Comparison of each VISN and station to its median counterpart yields deviation scores with associated significance levels. The deviation scores represent the number of satisfaction scale points that the satisfaction rating for each VISN or station differs from the satisfaction rating of the median VISN or station. VISNs and stations are ranked by their standardized deviation from the median from highest to lowest to provide an index comparable to the single index for outcomes. These data are presented in Tables 4-16 and 4-17.

Limitations to the Monitoring Methodology

Several limitations of the data presented here deserve comment and consideration. First, it must be acknowledged that although this report presents one of the largest outcome assessment efforts of its type, the numbers of cases and the follow-up rates from some individual stations are smaller than optimal. All stations, however, submitted sufficient data to be included in the comparisons. We are hopeful that data collection will continue at this high level of adequacy as VHA leadership emphasizes the value of the information available through the monitoring effort to the maintenance and improvement of the quality of clinical services in the new VA.

Second, it must be acknowledged that statistical risk adjustment, although widely used, is imperfect, and can never be as effective as random assignment in establishing equivalent groups. Since it will never be possible to randomly assign patients living in different localities to health care facilities (VA or otherwise), however, clinical performance evaluation must continue to develop within the limits of available risk adjustment technologies.

Third, instrumentation in large-scale outcome assessment efforts must be economical, and, in the area of psychiatric assessment, must typically rely on self-report data that are subject to misrepresentation. Some clinicians have expressed the specific concern that patients may underreport their improvement out of fear that reporting improvement will jeopardize their

compensation status. The instruments used in the current effort have well-established psychometric properties and were selected because of their consistency with results that were found using more extensive assessment batteries in smaller scale studies (Fontana & Rosenheck, 1996a). Moreover, a study of the effects of compensation-seeking on treatment outcomes found that there was no evidence of such effects among outpatients and among inpatients in programs of short to moderate lengths of stay (Fontana & Rosenheck, 1998). Only in long-stay programs (averaging 100 days) was there evidence of a significant compensation-seeking bias on outcomes. This compensation-seeking effect, along with generally poorer outcomes and poorer ratings of satisfaction, led us to suggest consideration of avoiding the implementation of long-stay programs.

Fourth, as noted above, only limited data are available on the nature of services delivered during intensive treatment, and no information is available on the quality of aftercare services. While this information might help to account for weaker outcomes at some stations, it would not alter the basic assessment of outcomes presented in this report. For a responsible, patient-oriented treatment agency, inpatient care cannot be divorced from outpatient care even if the care is delivered through a different health care system. At this stage in the development of methods for outcomes monitoring, we do not yet have the tools to both identify problems and present definitive solutions. At this time, comparative outcome data can only suggest broad directions for improvement. Treatment modification and development must be based on clinical and administrative experience, and on familiarity with the patients and operating circumstances confronting each station.

Further Analyses and the Commitment to Quality

We plan to conduct further analyses to determine the possible role of various treatment factors in contributing to superior outcomes. Primary among them are length of stay, size of program and use of medications. This past fiscal year, we completed our evaluation of the outcomes of the Women's Stress Disorder Treatment Teams (Fontana & Rosenheck, 2002). Also, in collaboration with the National Center for PTSD, we are developing monitoring instruments for assessing the outcomes of specialized outpatient PTSD programs.

Providing effective treatment of military-related PTSD is a major priority for the Veterans Health Administration. Although techniques of outcomes monitoring and assessment are in an early stage of development, the implementation of a nationwide effort to assess outcomes of intensive treatment of PTSD is a major accomplishment for VA, and reflects a commitment in the new VA to maintaining high levels of quality, accountability, and health care value.

Table 4-1. Adequacy of Data

VISN	Station	# Follow-Ups Due in FY'03	# Follow-Ups Due that were Obtained	% Follow-Ups Due that were Obtained*
1	Northampton	63	57	90
1	Togus	112	75	67
1	West Haven	31	22	71
1	White River Junction	54	30	56
2	Batavia (Buffalo)	85	77	91
3	Lyons	163	154	94
3	Montrose	114	112	98
4	Clarksburg	61	50	82
4	Coatesville	192	152	79
5	Baltimore	47	26	55
5	Martinsburg	111	70	63
6	Salem	72	71	99
6	Salisbury	118	93	79
7				
8	Bay Pines	91	74	81
8	Miami	66	56	85
9				
10	Brecksville (Cleveland)	29	23	79
10	Cincinnati	73	55	75
10	Dayton	49	27	55
11	Battle Creek	180	98	54
12	Milwaukee	27	15	56
12	North Chicago	168	98	58
12	Tomah	49	37	76
15	Topeka	93	73	78
16	Jackson	46	35	76
16	New Orleans	58	53	91
16	North Little Rock	208	200	96
17	Waco	89	72	81
18	Tucson	84	57	68
19	Denver	112	112	100
20	American Lake (Tacoma)	92	69	75
20	Boise	16	14	88
20	Roseburg	81	54	67
20	Seattle	201	178	89
21	Hilo	37	31	84
21	Palo Alto	199	128	64
22				
23	Des Moines	37	35	95
23	Hot Springs	42	27	64
ALL VA		3350	2610	78

* Program Measure #1 for PTSD in VHA Directive 10-96-051. SEP goal was met by all stations.

Table 4-2. Means for PTSD (Short Miss.) by VISN

VISN	FY'03 Adm. Mean	FY'03 Foll. Mean	FY'03 Diff. Foll. - Adm.*	FY'96 Adj. Foll. Mean	FY'03 Adj. Foll. Mean	FY'03 - FY'96 Difference	Dev. of FY'03 Adj. Foll. Mean from the Median Mean**	Sig. Level
1	38.49	38.16	-0.33	40.92	38.57	-2.35	0.55	
2	40.17	39.00	-1.17 *	37.93	38.26	0.33	0.24	
3	39.22	34.41	-4.81 *	36.56	34.23	-2.33	-3.79	0.0001
4	39.18	36.29	-2.89 *	37.35	36.81	-0.54	-1.21	0.04
5	40.09	37.96	-2.13 *	40.31	37.36	-2.95	-0.66	
6#	39.95	37.89	-2.06 *	39.59	38.02	-1.57	0.00	
7				41.09				
8	39.95	38.86	-1.09	40.70	38.21	-2.49	0.19	
9				42.09				
10	39.31	38.41	-0.90	40.07	38.42	-1.65	0.40	
11	39.88	40.29	0.41	38.10	39.92	1.82	1.90	X 0.005
12	40.16	39.78	-0.38	39.92	39.10	-0.82	1.09	
15	39.32	35.95	-3.37 *	38.13	37.05	-1.08	-0.97	
16	39.75	38.89	-0.86 *	40.01	39.03	-0.98	1.01	X 0.05
17	39.49	36.88	-2.61 *	37.35	36.98	-0.37	-1.04	
18	39.39	39.86	0.47	40.54	39.36	-1.18	1.35	
19	43.80	39.99	-3.81 *	38.84	37.36	-1.48	-0.66	
20	38.25	35.77	-2.48 *	38.87	36.48	-2.39	-1.54	0.004
21	37.58	36.31	-1.27 *	38.89	37.35	-1.54	-0.67	
22				35.27				
23	38.40	37.65	-0.75	38.39	38.27	-0.12	0.26	
ALL VA	39.42	37.54	-1.88 *	39.01	37.63	-1.38		

Indicates the median VISN for FY 2003.

* Significant at p<.05.

** X indicates that outcome for FY 2003 was significantly worse (p<.05) than the median VISN; SEP goal was not met.

Table 4-3. Means for PTSD (Short Miss.) by Station

VISN	Station	FY'03 Adm. Mean	FY'03 Foll. Mean	FY'03 Diff. Foll. - Adm.*	FY'96 Adj. Foll. Mean	FY'03 Adj. Foll. Mean	FY'03 - FY'96 Difference	Dev. of FY'03 Adj. Foll. Mean from the Median Mean**	Sig. Level
1	Northampton	38.90	37.20	-1.70 *	40.14	37.02	-3.12	-1.03	
1	Togus	38.45	38.44	-0.01	41.07	38.62	-2.45	0.56	
1	West Haven	35.25	36.90	1.65	41.00	40.64	-0.36	2.58	
1	White River Junction	40.19	40.21	0.02	41.49	40.05	-1.44	1.99	
2	Batavia (Buffalo)	40.17	39.00	-1.17 *	37.83	38.39	0.56	0.33	
3	Bronx				38.94				
3	Lyons	38.44	33.43	-5.01 *	35.27	33.52	-1.75	-4.54	0.0001
3	Montrose	40.28	35.75	-4.53 *	38.24	34.80	-3.44	-3.26	0.0003
4	Clarksburg	40.18	39.20	-0.98	33.10	39.28	6.18	1.22	
4	Coatesville	38.85	35.34	-3.51 *	41.13	36.12	-5.01	-1.94	0.02
5	Baltimore	40.50	40.42	-0.08	40.40	39.66	-0.74	1.60	
5	Martinsburg	39.94	37.02	-2.92 *	40.44	36.17	-4.27	-1.89	
6	Salem	40.85	38.97	-1.88 *	40.73	39.34	-1.39	1.28	
6	Salisbury	39.27	37.06	-2.21 *	37.29	37.16	-0.13	-0.90	
7	Augusta				42.03				
7	Tuskegee				39.38				
8	Bay Pines	41.07	38.27	-2.80 *	41.93	37.34	-4.59	-0.71	
8	Miami	38.48	39.52	1.04	39.40	39.24	-0.16	1.18	
9	Louisville				41.92				
10	Brecksville (Cleveland)	37.79	38.90	1.11	39.26	37.24	-2.02	1.12	
10	Cincinnati	39.23	37.17	-2.06 *	40.77	37.37	-3.40	-0.69	
10	Dayton	40.75	40.52	-0.23	39.16	39.86	0.70	1.81	
11	Battle Creek	39.88	40.29	0.41	38.11	40.07	1.96	2.02	X 0.03
12	Milwaukee	39.18	34.97	-4.21 *	36.70	34.55	-2.15	-3.50	0.03
12	North Chicago	40.37	40.71	0.34	39.34	39.91	0.57	1.86	X 0.04
12	Tomah	39.96	39.13	-0.83	41.45	38.80	-2.65	0.75	
15	Topeka	39.32	35.95	-3.37 *	38.18	36.93	-1.25	-1.12	
16	Jackson	40.81	40.99	0.18	40.94	40.17	-0.77	2.11	
16	New Orleans	40.13	36.45	-3.68 *	39.98	36.62	-3.36	-1.43	
16	North Little Rock	39.46	39.17	-0.29	39.74	39.47	-0.27	1.41	
17	Temple				39.55				
17	Waco	39.49	36.88	-2.61 *	36.71	37.01	0.30	-1.05	
18	Phoenix				40.59				
18	Tucson	39.39	39.86	0.47		39.43		1.37	
19	Denver	43.80	39.99	-3.81 *	38.33	37.62	-0.71	-0.44	
19	Sheridan				39.47				
20	American Lake	39.84	38.93	-0.91	40.44	38.23	-2.21	0.18	
20	Anchorage				34.55				
20	Boise	39.37	34.62	-4.75 *	42.46	34.81	-7.65	-3.25	0.04
20	Portland				39.75				
20#	Roseburg	39.36	38.06	-1.30	35.25	38.06	2.81	0.00	
20	Seattle	37.20	33.94	-3.26 *	39.96	35.21	-4.75	-2.85	0.0006
21	Hilo	38.34	35.90	-2.44	39.92	36.63	-3.29	-1.43	
21	Palo Alto	37.38	36.42	-0.96	38.44	37.35	-1.09	-0.71	
21	San Francisco				41.13				
22	West Los Angeles				35.38				
23	Minneapolis				41.44				
23	Knoxville				41.90				
23	Des Moines	38.70	37.97	-0.73	31.82	38.98	7.16	0.92	
23	Hot Springs	38.01	37.23	-0.78		37.52		-0.53	
ALL VA		39.42	37.54	-1.88 *	39.01	37.63	-1.38		

Indicates the median station for FY 2003.

* Significant at p<.05.

** X indicates that outcome for FY 2003 was significantly worse (p<.05) than the median station; SEP goal was not met.

Table 4-4. Means for PTSD (NEPEC Scale) by VISN

VISN	FY'03 Adm. Mean	FY'03 Foll. Mean	FY'03 Diff. Foll. - Adm.*	FY'96 Adj. Foll. Mean	FY'03 Adj. Foll. Mean	FY'03 - FY'96 Difference	Dev. of FY'03 Adj. Foll. Mean from the Median Mean**	Sig. Level
1	16.24	15.76	-0.48	16.86	15.94	-0.92	0.43	0.0001
2	16.96	16.13	-0.83 *	16.29	15.83	-0.46	0.32	
3	16.65	14.23	-2.42 *	15.31	14.09	-1.22	-1.42	
4	16.50	15.26	-1.24 *	15.86	15.40	-0.46	-0.11	
5	16.61	16.06	-0.55 *	16.68	16.01	-0.67	0.50	
6#	16.79	15.44	-1.35 *	15.98	15.51	-0.47	0.00	
7				17.14				
8	16.96	15.73	-1.23 *	16.96	15.50	-1.46	-0.01	0.02
9				17.66				
10	16.72	15.91	-0.81	16.53	15.91	-0.62	0.40	
11	16.60	16.40	-0.20	15.95	16.25	0.30	0.74	
12	16.76	16.19	-0.57	16.39	16.03	-0.36	0.53	
15	16.72	15.09	-1.63 *	15.73	15.45	-0.28	-0.06	
16	16.91	16.02	-0.89 *	16.60	15.97	-0.63	0.47	0.04
17	17.05	15.49	-1.56 *	15.60	15.43	-0.17	-0.08	
18	16.79	16.34	-0.45	16.63	16.20	-0.43	0.69	
19	17.74	15.72	-2.02 *	16.30	15.10	-1.20	-0.41	
20	16.37	14.88	-1.49 *	16.13	15.12	-1.01	-0.38	
21	16.18	15.17	-1.01 *	16.29	15.46	-0.83	-0.05	
22				13.91				
23	16.61	16.11		15.43	16.17	0.74	0.66	
ALL VA	16.68	15.50	-1.18 *	16.15	15.53	-0.62		

Indicates the median VISN for FY 2003.

* Significant at p<.05.

** X indicates that outcome for FY 2003 was significantly worse (p<.05) than the median VISN; SEP goal was not met.

Table 4-5. Means for PTSD (NEPEC Scale) by Station

VISN	Station	FY'03 Adm. Mean	FY'03 Foll. Mean	FY'03 Diff. Foll. - Adm.*	FY'96 Adj. Foll. Mean	FY'03 Adj. Foll. Mean	FY'03 - FY'96 Difference	Dev. of FY'03 Adj. Foll. Mean from the Median Mean**	Sig. Level
1	Northampton	16.32	15.73	-0.59	17.12	15.74	-1.38	0.03	
1	Togus	16.20	15.45	-0.75	16.87	15.58	-1.29	-0.13	
1	West Haven	15.44	15.72	0.28	16.76	16.83	0.07	1.12	X 0.05
1	White River Junction	16.74	16.63	-0.11	16.92	16.66	-0.26	0.95	
2	Batavia (Buffalo)	16.96	16.13	-0.83	16.27	15.91	-0.36	0.20	
3	Bronx				15.81				
3	Lyons	16.35	14.42	-1.93	15.04	14.47	-0.57	-1.24	0.0009
3	Montrose	17.06	13.96	-3.10	15.59	13.60	-1.99	-2.11	0.0001
4	Clarksburg	16.55	16.36	-0.19	14.80	16.56	1.76	0.84	
4	Coatesville	16.48	14.90	-1.58	16.80	15.13	-1.67	-0.59	
5	Baltimore	16.81	16.72	-0.09	16.70	16.54	-0.16	0.83	
5	Martinsburg	16.54	15.81	-0.73	16.76	15.63	-1.13	-0.08	
6	Salem	17.16	16.01	-1.15	16.06	16.25	0.19	0.54	
6	Salisbury	16.51	15.00	-1.51	15.84	15.08	-0.76	-0.63	
7	Augusta				17.57				
7	Tuskegee				16.41				
8	Bay Pines	17.41	15.63	-1.78	16.94	15.26	-1.68	-0.45	
8	Miami	16.37	15.85	-0.52	16.94	15.72	-1.22	0.01	
9	Louisville				17.59				
10	Brecksville (Cleveland)	16.31	15.48	-0.83	15.96	15.45	-0.51	-0.27	
10#	Cincinnati	16.55	15.57	-0.98	16.92	15.71	-1.21	0.00	
10	Dayton	17.40	16.98	-0.42	16.18	16.66	0.48	0.95	
11	Battle Creek	16.60	16.40	-0.20	15.96	16.34	0.38	0.62	
12	Milwaukee	14.62	12.68	-1.94	13.97	13.24	-0.73	-2.48	0.0002
12	North Chicago	17.00	16.79	-0.21	16.42	16.54	0.12	0.82	X 0.03
12	Tomah	16.93	15.92	-1.01	17.00	15.78	-1.22	0.06	
15	Topeka	16.72	15.09	-1.63	15.74	15.42	-0.32	-0.29	
16	Jackson	17.09	16.37	-0.72	16.82	16.13	-0.69	0.42	
16	New Orleans	16.94	15.33	-1.61	17.09	15.36	-1.73	-0.36	
16	North Little Rock	16.87	16.14	-0.73	16.33	16.13	-0.20	0.42	
17	Temple				16.08				
17	Waco	17.05	15.49	-1.56	15.45	15.46	0.01	-0.26	
18	Phoenix				16.66				
18	Tucson	16.79	16.34	-0.45		16.24		0.53	
19	Denver	17.74	15.72	-2.02	16.36	15.22	-1.14	-0.50	
19	Sheridan				16.13				
20	American Lake	16.52	16.24	-0.28	16.43	16.11	-0.32	0.40	
20	Anchorage				15.24				
20	Boise	17.21	14.15	-3.06	16.95	14.04	-2.91	-1.68	0.02
20	Portland				16.54				
20	Roseburg	16.87	15.81	-1.06	14.66	15.74	1.08	0.03	
20	Seattle	16.09	14.14	-1.95	16.62	14.50	-2.12	-1.22	0.0005
21	Hilo	15.88	15.11	-0.77	15.84	15.44	-0.40	-0.27	
21	Palo Alto	16.25	15.19	-1.06	16.18	15.35	-0.83	-0.36	
21	San Francisco				16.94				
22	West Los Angeles				13.92				
23	Minneapolis				16.87				
23	Knoxville				17.15				
23	Des Moines	16.81	16.84	0.03	12.27	17.00	4.73	1.29	X 0.007
23	Hot Springs	16.34	15.16	-1.18		15.19		-0.52	
ALL VA		16.68	15.50	-1.18	16.15	15.53	-0.62		

Indicates the median station for FY 2003.

* Significant at p<.05.

** X indicates that outcome for FY 2003 was significantly worse (p<.05) than the median station; SEP goal was not met.

Table 4-6. Means for Alcohol Abuse (ASI) by VISN

VISN	FY'03 Adm. Mean	FY'03 Foll. Mean	FY'03 Diff. Foll. - Adm.*	FY'96 Adj. Foll. Mean	FY'03 Adj. Foll. Mean	FY'03 - FY'96 Difference	Dev. of FY'03 Adj. Foll. Mean from the Median Mean**	Sig. Level
1	0.11	0.09	-0.02 *	0.17	0.09	-0.08	-0.01	0.0001
2	0.11	0.11	0.00	0.18	0.11	-0.07	0.00	
3	0.17	0.11	-0.06 *	0.14	0.10	-0.04	-0.01	
4	0.16	0.12	-0.04 *	0.17	0.11	-0.06	0.01	
5	0.12	0.11	-0.01	0.16	0.11	-0.05	0.00	
6	0.09	0.09	0.00	0.15	0.10	-0.05	-0.01	
7				0.16				
8	0.12	0.10	-0.02 *	0.17	0.10	-0.07	-0.01	
9				0.15				
10	0.11	0.11	0.00	0.18	0.11	-0.07	0.01	
11	0.13	0.12	-0.01	0.17	0.12	-0.05	0.01	
12#	0.13	0.11	-0.02	0.16	0.11	-0.05	0.00	
15	0.19	0.12	-0.07 *	0.16	0.10	-0.06	0.00	
16	0.12	0.09	-0.03 *	0.17	0.10	-0.07	-0.01	
17	0.10	0.10	0.00	0.15	0.11	-0.04	0.00	
18	0.12	0.11	-0.01	0.17	0.11	-0.06	0.01	
19	0.08	0.14	0.06 @	0.16	0.14	-0.02	0.04 X	
20	0.11	0.10	-0.01 *	0.16	0.10	-0.06	-0.01	
21	0.13	0.12	-0.01	0.20	0.11	-0.09	0.01	
22				0.14				
23	0.17	0.11	-0.06 *	0.18	0.10	-0.08	-0.01	
ALL VA	0.12	0.11	-0.01 *	0.16	0.11	-0.05		

Indicates the median VISN for FY 2003.

* Significant at p<.05. @ Outcome was significantly worse.

** X indicates that outcome for FY 2003 was significantly worse (p<.05) than the median VISN; SEP goal was not met.

Table 4-7. Means for Alcohol Abuse (ASI) by Station

VISN	Station	FY'03 Adm. Mean	FY'03 Foll. Mean	FY'03 Diff. Foll. - Adm.*	FY'96 Adj. Foll. Mean	FY'03 Adj. Foll. Mean	FY'03 - FY'96 Difference	Dev. of FY'03 Adj. Foll. Mean from the Median Mean**	Sig. Level
1	Northampton	0.11	0.08	-0.03 *	0.15	0.09	-0.06	-0.02	
1	Togus	0.10	0.08	-0.02 *	0.17	0.09	-0.08	-0.02	
1	West Haven	0.10	0.08	-0.02	0.19	0.09	-0.10	-0.01	
1	White River Junction	0.12	0.13	0.01	0.18	0.13	-0.05	0.03	
2	Batavia (Buffalo)	0.11	0.11	0.00	0.18	0.11	-0.07	0.00	
3	Bronx				0.17				
3	Lyons	0.12	0.10	-0.02 *	0.13	0.10	-0.03	-0.01	
3#	Montrose	0.22	0.12	-0.10 *	0.13	0.10	-0.03	0.00	
4	Clarksburg	0.09	0.09	0.00	0.14	0.10	-0.04	0.00	
4	Coatesville	0.19	0.13	-0.06 *	0.20	0.12	-0.08	0.01	
5	Baltimore	0.14	0.12	-0.02	0.17	0.11	-0.06	0.01	
5	Martinsburg	0.12	0.11	-0.01	0.16	0.11	-0.05	0.00	
6	Salem	0.09	0.09	0.00	0.14	0.10	-0.04	-0.01	
6	Salisbury	0.09	0.10	0.01	0.17	0.11	-0.06	0.00	
7	Augusta				0.16				
7	Tuskegee				0.16				
8	Bay Pines	0.11	0.10	-0.01	0.17	0.10	-0.07	-0.01	
8	Miami	0.12	0.10	-0.02 *	0.17	0.10	-0.07	0.00	
9	Louisville				0.14				
10	Brecksville (Cleveland)	0.10	0.09	-0.01	0.16	0.10	-0.06	-0.01	
10	Cincinnati	0.09	0.09	0.00	0.19	0.10	-0.09	-0.01	
10	Dayton	0.14	0.16	0.02	0.18	0.16	-0.02	0.05	X 0.0009
11	Battle Creek	0.13	0.12	-0.01	0.17	0.12	-0.05	0.02	
12	Milwaukee	0.35	0.09	-0.26 *	0.11	0.04	-0.07	-0.06	0.003
12	North Chicago	0.10	0.10	0.00	0.16	0.10	-0.06	0.00	
12	Tomah	0.11	0.14	0.03 @	0.17	0.14	-0.03	0.04	X 0.01
15	Topeka	0.19	0.12	-0.07 *	0.16	0.10	-0.06	0.00	
16	Jackson	0.09	0.07	-0.02	0.17	0.07	-0.10	-0.03	0.04
16	New Orleans	0.09	0.08	-0.01 *	0.15	0.08	-0.07	-0.02	
16	North Little Rock	0.13	0.10	-0.03 *	0.18	0.11	-0.07	0.00	
17	Temple				0.14				
17	Waco	0.10	0.10	0.00	0.15	0.11	-0.04	0.00	
18	Phoenix				0.17				
18	Tucson	0.12	0.11	-0.01		0.11		0.01	
19	Denver	0.08	0.14	0.06 @	0.16	0.15	-0.01	0.04	X 0.0001
19	Sheridan				0.15				
20	American Lake	0.11	0.12	0.01	0.16	0.12	-0.04	0.02	
20	Anchorage				0.18				
20	Boise	0.07	0.10	0.03	0.16	0.11	-0.05	0.00	
20	Portland				0.14				
20	Roseburg	0.09	0.09	0.00	0.16	0.10	-0.06	-0.01	
20	Seattle	0.12	0.09	-0.03 *	0.17	0.09	-0.08	-0.01	
21	Hilo	0.12	0.12	0.00	0.25	0.13	-0.12	0.02	
21	Palo Alto	0.13	0.11	-0.02	0.19	0.11	-0.08	0.01	
21	San Francisco				0.22				
22	West Los Angeles				0.14				
23	Minneapolis				0.18				
23	Knoxville				0.18				
23	Des Moines	0.15	0.11	-0.04	0.18	0.11	-0.07	0.00	
23	Hot Springs	0.21	0.11	-0.10		0.09		-0.01	
ALL VA		0.12	0.11	-0.01 *	0.16	0.11	-0.05		

Indicates the median station for FY 2003.

* Significant at p<.05. @Outcome was significantly worse.

** X indicates that outcome for FY 2003 was significantly worse (p<.05) than the median station; SEP goal was not met.

Table 4-8. Means for Drug Abuse (ASI) by VISN

VISN	FY'03 Adm. Mean	FY'03 Foll. Mean	FY'03 Diff. Foll. - Adm.*	FY'96 Adj. Foll. Mean	FY'03 Adj. Foll. Mean	FY'03 - FY'96 Difference	Dev. of FY'03 Adj. Foll. Mean from the Median Mean**	Sig. Level
1	0.05	0.04	-0.01 *	0.07	0.04	-0.03	-0.01	
2	0.05	0.04	-0.01	0.08	0.04	-0.04	0.00	
3	0.08	0.05	-0.03 *	0.06	0.04	-0.02	0.00	
4	0.07	0.05	-0.02 *	0.08	0.05	-0.03	0.01	
5#	0.06	0.05	-0.01	0.07	0.04	-0.03	0.00	
6	0.04	0.04	0.00	0.06	0.04	-0.02	0.00	
7				0.07				
8	0.04	0.03	-0.01 *	0.07	0.03	-0.04	-0.01	0.04
9				0.05				
10	0.05	0.04	-0.01	0.07	0.04	-0.03	0.00	
11	0.05	0.06	0.01	0.07	0.06	-0.01	0.01	X 0.02
12	0.06	0.05	-0.01 *	0.07	0.04	-0.03	0.00	
15	0.07	0.05	-0.02 *	0.06	0.05	-0.01	0.01	
16	0.04	0.03	-0.01 *	0.07	0.03	-0.04	-0.01	0.004
17	0.04	0.04	0.00	0.06	0.04	-0.02	0.00	
18	0.04	0.04	0.05	0.07	0.05	-0.02	0.00	
19	0.04	0.05	0.01 @	0.07	0.05	-0.02	0.01	
20	0.04	0.04	0.00	0.07	0.04	-0.03	0.00	
21	0.05	0.05	0.00	0.09	0.05	-0.04	0.00	
22				0.07				
23	0.06	0.06	0.00	0.08	0.05	-0.03	0.01	
ALL VA	0.05	0.04	-0.01 *	0.07	0.04	-0.03		

Indicates the median VISN for FY 2003.

* Significant at p<.05. @ Outcome was significantly worse.

** X indicates that outcome for FY 2003 was significantly worse (p<.05) than the median VISN; SEP goal was not met.

Table 4-9. Means for Drug Abuse (ASI) by Station

VISN	Station	FY'03 Adm. Mean	FY'03 Foll. Mean	FY'03 Diff. Foll. - Adm.*	FY'96 Adj. Foll. Mean	FY'03 Adj. Foll. Mean	FY'03 - FY'96 Difference	Dev. of FY'03 Adj. Foll. Mean from the Median Mean**	Sig. Level
1	Northampton	0.05	0.03	-0.02	0.06	0.03	-0.03	-0.01	0.04
1	Togus	0.03	0.03	0.00	0.07	0.04	-0.03	-0.01	
1	West Haven	0.06	0.04	-0.02	0.08	0.03	-0.05	-0.01	
1	White River Junction	0.05	0.05	0.00	0.07	0.06	-0.01	0.01	
2	Batavia (Buffalo)	0.05	0.04	-0.01	0.08	0.04	-0.04	0.00	
3	Bronx				0.08				
3	Lyons	0.06	0.05	-0.01	0.06	0.05	-0.01	0.00	
3	Montrose	0.12	0.06	-0.06	0.06	0.04	-0.02	0.00	
4	Clarksburg	0.04	0.04	0.00	0.06	0.05	-0.01	0.00	
4	Coatesville	0.08	0.05	-0.03	0.09	0.05	-0.04	0.01	
5	Baltimore	0.08	0.06	-0.02	0.07	0.05	-0.02	0.01	
5	Martinsburg	0.05	0.05	0.00	0.07	0.04	-0.03	0.00	
6	Salem	0.04	0.03	-0.01	0.06	0.04	-0.02	0.00	
6	Salisbury	0.04	0.04	0.00	0.07	0.04	-0.03	0.00	
7	Augusta				0.07				
7	Tuskegee				0.07				
8	Bay Pines	0.04	0.03	-0.01	0.07	0.03	-0.04	-0.02	0.003
8	Miami	0.05	0.05	0.00	0.07	0.04	-0.03	0.00	
9	Louisville				0.05				
10	Brecksville (Cleveland)	0.05	0.04	-0.01	0.07	0.03	-0.04	-0.01	
10	Cincinnati	0.03	0.04	0.01	0.07	0.04	-0.03	-0.01	
10	Dayton	0.07	0.06	-0.01	0.08	0.05	-0.03	0.01	
11	Battle Creek	0.05	0.06	0.01	0.07	0.06	-0.01	0.01	X 0.005
12	Milwaukee	0.17	0.04	-0.13	0.05	0.01	-0.04	-0.03	0.002
12	North Chicago	0.05	0.05	0.00	0.07	0.05	-0.02	0.00	
12	Tomah	0.04	0.05	0.01	@	0.06	-0.01	0.01	
15	Topeka	0.07	0.05	-0.02	0.06	0.05	-0.01	0.01	
16	Jackson	0.03	0.03	0.00	0.07	0.03	-0.04	-0.01	
16	New Orleans	0.04	0.03	-0.01	0.07	0.03	-0.04	-0.01	0.02
16	North Little Rock	0.04	0.03	-0.01	0.08	0.03	-0.05	-0.01	0.004
17	Temple				0.06				
17	Waco	0.04	0.04	0.00	0.06	0.04	-0.02	0.00	
18	Phoenix				0.07				
18	Tucson	0.04	0.05	0.01		0.05		0.01	
19	Denver	0.04	0.05	0.01	@	0.07	-0.02	0.01	
19	Sheridan				0.06				
20	American Lake	0.04	0.05	0.01	0.07	0.05	-0.02	0.00	
20	Anchorage				0.07				
20	Boise	0.03	0.04	0.01	0.08	0.05	-0.03	0.01	
20	Portland				0.06				
20	Roseburg	0.04	0.04	0.00	0.07	0.04	-0.03	0.00	
20	Seattle	0.05	0.04	-0.01	0.07	0.04	-0.03	-0.01	0.04
21	Hilo	0.04	0.05	0.01	0.06	0.05	-0.01	0.01	
21#	Palo Alto	0.05	0.05	0.00	0.09	0.04	-0.05	0.00	
21	San Francisco				0.10				
22	West Los Angeles				0.07				
23	Minneapolis				0.08				
23	Knoxville				0.08				
23	Des Moines	0.06	0.07	0.01	0.08	0.07	-0.01	0.03	X 0.0001
23	Hot Springs	0.06	0.04	-0.02		0.04		-0.01	
ALL VA		0.05	0.04	-0.01	*	0.07	0.04	-0.03	

Indicates the median station for FY 2003.

* Significant at p<.05. @Outcome was significantly worse.

** X indicates that outcome for FY 2003 was significantly worse (p<.05) than the median station; SEP goal was not met.

Table 4-10. Means for Violence by VISN

VISN	FY'03 Adm. Mean	FY'03 Foll. Mean	FY'03 Diff. Foll. - Adm.*	FY'96 Adj. Foll. Mean	FY'03 Adj. Foll. Mean	FY'03 - FY'96 Difference	Dev. of FY'03 Adj. Foll. Mean from the Median Mean**	Sig. Level
1	1.28	0.80	-0.48 *	1.37	0.83	-0.54	0.06	
2	1.38	0.75	-0.63 *	1.23	0.73	-0.50	-0.04	
3	1.38	0.53	-0.85 *	0.96	0.48	-0.48	-0.29	0.0001
4	1.51	0.73	-0.78 *	1.30	0.74	-0.56	-0.02	
5	1.68	0.79	-0.89 *	1.30	0.63	-0.67	-0.14	
6	1.25	0.58	-0.67 *	1.19	0.62	-0.57	-0.14	0.04
7				1.16				
8	1.43	0.94	-0.49 *	1.39	0.89	-0.50	0.13	
9				1.61				
10	1.34	0.92	-0.42 *	1.44	0.93	-0.51	0.16	X 0.04
11	1.62	1.05	-0.57 *	1.17	0.97	-0.20	0.20	X 0.02
12	1.43	0.93	-0.50 *	1.29	0.88	-0.41	0.12	
15	1.27	0.63	-0.64 *	1.13	0.72	-0.41	-0.05	
16	1.38	0.80	-0.58 *	1.23	0.80	-0.43	0.04	
17	1.29	0.73	-0.56 *	1.07	0.72	-0.35	-0.04	
18	1.27	1.08	-0.19	1.45	1.03	-0.42	0.27	X 0.006
19	1.68	0.87	-0.81 *	1.23	0.73	-0.50	-0.04	
20#	1.20	0.69	-0.51 *	1.20	0.77	-0.43	0.00	
21	1.02	0.69	-0.33 *	1.25	0.78	-0.47	0.01	
22				0.81				
23	1.29	0.76	-0.53 *	1.30	0.77	-0.53	0.01	
ALL VA	1.36	0.76	-0.60 *	1.23	0.76	-0.47		

Indicates the median VISN for FY 2003.

* Significant at $p < .05$.** X indicates that outcome for FY 2003 was significantly worse ($p < .05$) than the median VISN; SEP goal was not met.

Table 4-11. Means for Violence by Station

VISN	Station	FY'03 Adm. Mean	FY'03 Foll. Mean	FY'03 Diff. Foll. - Adm.*	FY'96 Adj. Foll. Mean	FY'03 Adj. Foll. Mean	FY'03 - FY'96 Difference	Dev. of FY'03 Adj. Foll. Mean from the Median Mean**	Sig. Level
1#	Northampton	1.37	0.80	-0.57 *	1.38	0.77	-0.61	0.00	
1	Togus	1.31	0.75	-0.56 *	1.44	0.80	-0.64	0.03	
1	West Haven	1.16	0.62	-0.54 *	1.25	0.81	-0.44	0.04	
1	White River Junction	1.58	1.05	-0.53 *	1.57	1.03	-0.54	0.26	
2	Batavia (Buffalo)	1.38	0.75	-0.63 *	1.23	0.73	-0.50	-0.04	
3	Bronx				1.39				
3	Lyons	1.28	0.53	-0.75 *	0.80	0.50	-0.30	-0.26	0.02
3	Montrose	1.51	0.53	-0.98 *	1.08	0.46	-0.62	-0.31	0.006
4	Clarksburg	1.53	0.70	-0.83 *	0.90	0.67	-0.23	-0.09	
4	Coatesville	1.51	0.74	-0.77 *	1.67	0.76	-0.91	-0.01	
5	Baltimore	1.68	0.77	-0.91 *	1.44	0.67	-0.77	-0.10	
5	Martinsburg	1.68	0.73	-0.95 *	1.25	0.61	-0.64	-0.16	
6	Salem	1.30	0.57	-0.73 *	1.30	0.64	-0.66	-0.13	
6	Salisbury	1.22	0.58	-0.64 *	1.01	0.61	-0.40	-0.16	
7	Augusta				1.03				
7	Tuskegee				1.41				
8	Bay Pines	1.59	0.94	-0.65 *	1.48	0.86	-0.62	0.09	
8	Miami	1.23	0.94	-0.29 *	1.30	0.94	-0.36	0.17	
9	Louisville				1.61				
10	Brecksville (Cleveland)	1.36	0.94	-0.42 *	1.35	0.92	-0.43	0.15	
10	Cincinnati	1.28	0.86	-0.42 *	1.51	0.90	-0.61	0.13	
10	Dayton	1.47	1.04	-0.43 *	1.39	0.99	-0.40	0.23	
11	Battle Creek	1.62	1.05	-0.57 *	1.17	0.97	-0.20	0.20	
12	Milwaukee	1.60	0.82	-0.78 *	0.61	0.76	0.15	0.00	
12	North Chicago	1.44	0.97	-0.47 *	1.29	0.92	-0.37	0.15	
12	Tomah	1.34	0.86	-0.48 *	1.46	0.83	-0.63	0.06	
15	Topeka	1.27	0.63	-0.64 *	1.13	0.71	-0.42	-0.05	
16	Jackson	1.47	0.88	-0.59 *	1.47	0.86	-0.61	0.09	
16	New Orleans	1.46	0.40	-1.06 *	1.10	0.41	-0.69	-0.36	0.005
16	North Little Rock	1.34	0.90	-0.44 *	1.21	0.90	-0.31	0.13	
17	Temple				0.95				
17	Waco	1.29	0.73	-0.56 *	1.10	0.73	-0.37	-0.04	
18	Phoenix				1.45				
18	Tucson	1.27	1.08	-0.19		1.04		0.27	X 0.04
19	Denver	1.68	0.87	-0.81 *	1.17	0.73	-0.44	-0.04	
19	Sheridan				1.33				
20	American Lake	1.17	0.91	-0.26 *	1.12	0.93	-0.19	0.16	
20	Anchorage				1.10				
20	Boise	1.41	0.82	-0.59 *	1.27	0.77	-0.50	0.00	
20	Portland				1.33				
20	Roseburg	1.41	0.58	-0.83 *	1.17	0.59	-0.58	-0.18	
20	Seattle	1.13	0.63	-0.50 *	1.20	0.75	-0.45	-0.02	
21	Hilo	1.40	0.81	-0.59 *	1.39	0.78	-0.61	0.01	
21	Palo Alto	0.92	0.66	-0.26 *	1.24	0.79	-0.45	0.02	
21	San Francisco				1.27				
22	West Los Angeles				0.81				
23	Minneapolis				1.60				
23	Knoxville				1.51				
23	Des Moines	1.35	0.73	-0.62 *	0.78	0.75	-0.03	-0.02	
23	Hot Springs	1.20	0.80	-0.40 *		0.80		0.03	
ALL VA		1.36	0.76	-0.60 *	1.23	0.76	-0.47		

Indicates the median station for FY 2003.

* Significant at p<.05.

** X indicates that outcome for FY 2003 was significantly worse (p<.05) than the median station; SEP goal was not met.

Table 4-12. Means for Work (Days) by VISN

VISN	FY'03 Adm. Mean	FY'03 Foll. Mean	FY'03 Diff. Foll. - Adm.*	FY'98 Adj. Foll. Mean	FY'03 Adj. Foll. Mean	FY'03 - FY'98 Difference	Dev. of FY'03 Adj. Foll. Mean from the Median Mean**	Sig. Level
1	3.94	2.77	-1.17 @	2.82	2.23	-0.59	0.66	
2	3.83	2.08	-1.75 @	2.02	1.88	-0.14	0.30	
3	2.88	1.17	-1.71 @	7.54	1.08	-6.46	-0.50	
4	4.21	1.48	-2.73 @	2.15	1.04	-1.11	-0.54	
5	1.67	0.79	-0.88 @	3.14	1.45	-1.69	-0.13	
6	2.42	0.35	-2.07 @	1.59	0.87	-0.72	-0.71	
7				1.92				
8	3.31	1.61	-1.70 @	2.70	1.27	-1.43	-0.31	
9								
10	1.68	1.44	-0.24	4.12	1.92	-2.20	0.34	
11	2.87	1.83	-1.04	2.76	2.07	-0.69	0.49	
12	2.51	1.80	-0.71	1.62	1.94	0.32	0.36	
15	4.04	1.37	-2.67 @	2.34	1.22	-1.12	-0.36	
16	2.39	1.98	-0.41	2.12	2.47	0.35	0.89	
17	3.83	1.15	-2.68 @	2.09	0.98	-1.11	-0.60	
18	5.47	3.06	-2.41 @				0.47	
19	3.29	1.42	-1.87 @	2.61	1.33	-1.28	-0.25	
20	1.86	1.67	-0.19	2.69	1.87	-0.82	0.29	
21#	3.33	1.96	-1.37 @	1.96	1.58	-0.38	0.00	
22				3.70				
23	3.09	3.22	0.13	0.59	3.17	2.58	1.59	0.02
ALL VA	2.95	1.67	-1.28 @	2.79	1.69	-1.10		

Indicates the median VISN for FY 2003.

* Significant at $p < .05$. @ Outcome was significantly worse.

** X indicates that outcome for FY 2003 was significantly worse ($p < .05$) than the median VISN; SEP goal was not met.
No VISN was significantly worse than the median VISN for FY 2003.

Table 4-13. Means for Work (Days) by Station

VISN	Station	FY'03 Adm. Mean	FY'03 Foll. Mean	FY'03 Diff. Foll. - Adm.*	FY'98 Adj. Foll. Mean	FY'03 Adj. Foll. Mean	FY'03 - FY'98 Difference	Dev. of FY'03 Adj. Foll. Mean from the Median Mean**	Sig. Level
1	Northampton	4.64	2.39	-2.25 @	2.57	1.86	-0.71	0.02	
1	Togus	3.83	3.64	-0.19		2.93		1.09	
1	West Haven	2.76	2.20	-0.56	3.35	2.15	-1.20	0.31	
1	White River Junction	3.75	1.72	-2.03		1.14		-0.70	
2#	Batavia (Buffalo)	3.83	2.08	-1.75 @	1.88	1.84	-0.04	0.00	
3	Bronx				2.62				
3	Lyons	3.31	0.96	-2.35 @	11.22	0.40	-10.82	-1.44	X
3	Montrose	2.32	1.46	-0.86	4.61	1.72	-2.89	-0.12	
4	Clarksburg	4.50	0.55	-3.95 @	2.40	0.27	-2.13	-1.57	X
4	Coatesville	4.12	1.79	-2.33 @	2.02	1.25	-0.77	-0.59	
5	Baltimore	1.58	0.54	-1.04	3.11	0.99	-2.12	-0.85	
5	Martinsburg	1.70	0.89	-0.81	3.01	1.72	-1.29	-0.12	
6	Salem	1.51	0.51	-1.00	2.09	1.41	-0.68	-0.43	
6	Salisbury	3.11	0.22	-2.89 @	1.10	0.41	-0.69	-1.43	X
7	Augusta				1.42				
7	Tuskegee				2.16				
8	Bay Pines	4.01	1.37	-2.64 @	2.86	0.76	-2.10	-1.08	
8	Miami	2.40	1.96	-0.44	2.48	2.03	-0.45	0.19	
9	Louisville								
10	Brecksville (Cleveland)	0.35	0.58	0.23	6.43	1.41	-5.02	-0.43	
10	Cincinnati	2.09	2.09	0.00	2.95	2.54	-0.41	0.70	
10	Dayton	2.01	0.89	-1.12	3.82	1.20	-2.62	-0.63	
11	Battle Creek	2.87	1.83	-1.04	2.85	2.03	-0.82	0.19	
12	Milwaukee	2.23	2.09	-0.14		2.26		0.43	
12	North Chicago	2.73	1.48	-1.25 @	1.40	1.47	0.07	-0.37	
12	Tomah	2.04	2.56	0.52	2.16	3.04	0.88	1.21	
15	Topeka	4.04	1.38	-2.66 @	2.26	1.23	-1.03	-0.61	
16	Jackson	4.85	4.60	-0.25	0.91	3.08	2.17	1.24	
16	New Orleans	2.67	1.84	-0.83	2.05	2.34	0.29	0.50	
16	North Little Rock	1.89	1.56	-0.33	2.35	2.37	0.02	0.53	
17	Temple								
17	Waco	3.83	1.15	-2.68 @	2.12	0.98	-1.14	-0.86	
18	Phoenix								
18	Tucson	5.47	3.06	-2.41 @		2.03		0.19	
19	Denver	3.29	1.42	-1.87 @		1.29		-0.55	
19	Sheridan				2.69				
20	American Lake	0.91	1.00	0.09	2.27	1.85	-0.42	0.01	
20	Anchorage				9.58				
20	Boise	4.37	1.90	-2.47	1.12	1.88	0.76	0.04	
20	Portland								
20	Roseburg	1.49	1.41	-0.08	3.36	2.10	-1.26	0.26	
20	Seattle	2.15	1.99	-0.16	2.13	1.87	-0.26	0.03	
21	Hilo	3.13	1.65	-1.48 @	2.47	1.72	-0.75	-0.12	
21	Palo Alto	3.38	2.04	-1.34	1.82	1.61	-0.21	-0.23	
21	San Francisco								
22	West Los Angeles				3.76				
23	Minneapolis				0.59				
23	Knoxville								
23	Des Moines	1.88	1.41	-0.47		1.89		0.05	
23	Hot Springs	4.65	5.65	1.00		4.87		3.03	0.003
ALL VA		2.95	1.67	-1.28 @	2.79	1.69	-1.10		

Indicates the median station for FY 2003.

* Significant at p<.05. @Outcome was significantly worse.

** X indicates that outcome for FY 2003 was significantly worse (p<.05) than the median station; SEP goal was not met.

Table 4-14. Outcomes Report Card by VISN

VISN	Stand. Miss.	Stand. NEPEC	Stand. Alc.	Stand. Drug	Stand. Viol.	Stand. Work (rev.)	Stand. PTSD M	Stand. Other M	Stand. Comb. M	<i>Rank Comb. M</i>
1	0.02	0.05	-0.04	-0.05	0.02	-0.03	0.035	-0.025	0.010	12
2	0.01	0.02	0.00	-0.01	-0.01	-0.01	0.015	-0.008	0.008	11
3	-0.18	-0.17	-0.02	0.00	-0.11	0.03	-0.175	-0.025	-0.200	1
4	-0.05	-0.01	0.02	0.04	-0.01	0.03	-0.030	0.020	-0.010	5.5
5	-0.02	0.04	0.00	0.00	-0.04	0.00	0.010	-0.010	0.000	9
6	0.00	0.00	-0.02	-0.03	-0.05	0.03	0.000	-0.018	-0.018	4
8	0.01	0.00	-0.02	-0.06	0.04	0.01	0.005	-0.008	-0.003	8
10	0.01	0.03	0.01	-0.02	0.05	-0.01	0.020	0.008	0.028	14
11	0.06	0.06	0.03	0.07	0.05	-0.02	0.060	0.033	0.093	17
12	0.04	0.05	0.00	0.00	0.04	-0.02	0.045	0.005	0.050	15
15	-0.03	0.00	-0.01	0.03	-0.01	0.01	-0.015	0.005	-0.010	5.5
16	0.05	0.06	-0.04	-0.11	0.02	-0.06	0.055	-0.048	0.008	11
17	-0.03	-0.01	0.00	-0.02	-0.01	0.02	-0.020	-0.003	-0.023	3
18	0.03	0.04	0.01	0.02	0.06	-0.01	0.035	0.020	0.055	16
19	-0.02	-0.03	0.10	0.03	-0.01	0.01	-0.025	0.033	0.008	11
20	-0.09	-0.05	-0.04	-0.03	0.00	-0.02	-0.070	-0.023	-0.093	2
21	-0.03	0.00	0.02	0.01	0.01	0.00	-0.015	0.010	-0.005	7
23	0.01	0.04	-0.01	0.04	0.00	-0.05	0.025	-0.005	0.020	13
MEAN	-0.01	0.01	0.00	-0.01	0.00	-0.01	0.00	0.00	0.00	
STD	0.06	0.05	0.03	0.04	0.04	0.03	0.05	0.02	0.06	

Table 4-15. Outcomes Report Card by Station

VISN	Station	Stand. Miss.	Stand. NEPEC	Stand. Alc.	Stand. Drug	Stand. Viol.	Stand. Work (rev.)	Stand. PTSD M	Stand. Other M	Stand. Comb. M	Rank Comb. M
1	Northampton	-0.03	0.00	-0.03	-0.05	0.00	0.00	-0.015	-0.020	-0.035	11
1	Togus	0.02	-0.01	-0.04	-0.04	0.01	-0.04	0.005	-0.028	-0.023	13.5
1	West Haven	0.04	0.04	-0.01	-0.02	0.01	-0.01	0.040	-0.008	0.033	27
1	White River Junction	0.04	0.04	0.04	0.04	0.04	0.01	0.040	0.033	0.073	35
2	Batavia (Buffalo)	0.01	0.01	0.01	0.00	-0.01	0.00	0.010	0.000	0.010	22.5
3	Lyons	-0.15	-0.10	-0.01	0.01	-0.07	0.05	-0.125	-0.005	-0.130	3
3	Montrose	-0.11	-0.17	0.00	0.00	-0.09	0.00	-0.140	-0.023	-0.163	1
4	Clarksburg	0.03	0.05	0.00	0.01	-0.02	0.04	0.040	0.008	0.048	31
4	Coatesville	-0.08	-0.06	0.04	0.06	0.00	0.03	-0.070	0.033	-0.038	9.5
5	Baltimore	0.03	0.03	0.01	0.02	-0.01	0.02	0.030	0.010	0.040	30
5	Martinsburg	-0.05	-0.01	0.00	-0.02	-0.03	0.00	-0.030	-0.013	-0.043	6.5
6	Salem	0.03	0.04	-0.02	-0.01	-0.03	0.01	0.035	-0.013	0.023	25
6	Salisbury	-0.03	-0.05	0.01	-0.01	-0.04	0.05	-0.040	0.003	-0.038	9.5
8	Bay Pines	-0.02	-0.03	-0.01	-0.07	0.02	0.04	-0.025	-0.005	-0.030	12
8	Miami	0.03	0.00	0.00	-0.02	0.04	-0.01	0.015	0.003	0.018	24
10	Brecksville (Cleveland)	0.02	-0.01	-0.01	-0.02	0.02	0.01	0.005	0.000	0.005	21
10	Cincinnati	-0.02	0.00	-0.02	-0.03	0.03	-0.02	-0.010	-0.010	-0.020	15.5
10	Dayton	0.03	0.04	0.07	0.02	0.03	0.01	0.035	0.033	0.068	34
11	Battle Creek	0.07	0.05	0.05	0.07	0.05	-0.01	0.060	0.040	0.100	37
12	Milwaukee	-0.04	-0.08	-0.06	-0.06	0.00	-0.01	-0.060	-0.033	-0.093	4
12	North Chicago	0.06	0.07	0.00	0.01	0.04	0.01	0.065	0.015	0.080	36
12	Tomah	0.02	0.00	0.06	0.04	0.01	-0.03	0.010	0.020	0.030	26
15	Topeka	-0.03	-0.02	0.00	0.03	-0.01	0.02	-0.025	0.010	-0.015	18
16	Jackson	0.04	0.02	-0.05	-0.04	0.01	-0.03	0.030	-0.028	0.003	20
16	New Orleans	-0.03	-0.02	-0.04	-0.05	-0.07	-0.01	-0.025	-0.043	-0.068	5
16	North Little Rock	0.06	0.05	0.00	-0.09	0.05	-0.03	0.055	-0.018	0.038	28.5
17	Waco	-0.03	-0.02	0.01	-0.02	-0.01	0.03	-0.025	0.003	-0.023	13.5
18	Tucson	0.03	0.03	0.02	0.02	0.06	-0.01	0.030	0.023	0.053	32
19	Denver	-0.02	-0.04	0.11	0.04	-0.01	0.02	-0.030	0.040	0.010	22.5
20	American Lake (Tacoma)	0.00	0.03	0.03	0.02	0.04	0.00	0.015	0.023	0.038	28.5
20	Boise	-0.04	-0.05	0.00	0.02	0.00	0.00	-0.045	0.005	-0.040	8
20	Roseburg	0.00	0.00	-0.01	-0.01	-0.04	-0.01	0.000	-0.018	-0.018	17
20	Seattle	-0.12	-0.13	-0.05	-0.06	-0.01	0.00	-0.125	-0.030	-0.155	2
21	Hilo	-0.03	-0.01	0.03	0.03	0.00	0.00	-0.020	0.015	-0.005	19
21	Palo Alto	-0.03	-0.03	0.02	0.00	0.01	0.01	-0.030	0.010	-0.020	15.5
23	Des Moines	0.02	0.06	0.00	0.08	0.00	0.00	0.040	0.020	0.060	33
23	Hot Springs	-0.01	-0.02	-0.02	-0.03	0.00	-0.06	-0.015	-0.028	-0.043	6.5
MEAN		-0.01	-0.01	0.00	0.00	0.00	0.00	-0.01	0.00	-0.01	
STD		0.05	0.05	0.03	0.04	0.03	0.02	0.05	0.02	0.06	

Table 4-16. Satisfaction with Treatment by VISN

VISN	FY 1997 Adj. Mean	FY 2003 Adj. Mean	FY'03 - FY'97	Deviation of FY'03 Mean from the Median Mean*	Significance Level	Rank
1	16.01	16.09	0.08	-0.04	0.0004	11
2		16.60		0.46		4
3	16.48	16.23	-0.25	0.09		9
4	16.62	16.57	-0.05	0.43		5
5	15.68	16.33	0.65	0.19		8
6	17.23	17.13	-0.10	1.00		1
7						
8	15.67	15.71	0.04	-0.43	0.0001	13
9						
10	15.07	14.59	-0.48	-1.55		18
11	15.63	15.68	0.05	-0.45		14
12	15.76	16.45	0.69	0.31		7
15	17.27	16.50	-0.77	0.36		6
16	16.16	15.89	-0.27	-0.25		12
17	15.18	14.75	-0.43	-1.39	0.0001	17
18		16.65		0.51		3
19	15.18	16.66	1.48	0.52		2
20	14.74	15.18	0.44	-0.96		16
21#	14.84	16.14	1.30	0.00		10
22						
23	15.15	15.49		-0.65		15
ALL VA	15.69	16.02	0.33			

Indicates the median VISN for FY 2003.

* X indicates that satisfaction for FY 2003 was significantly worse ($p < .05$) than for the median VISN.

Table 4-17. Satisfaction with Treatment by Station

VISN	Station	FY 1997 Adj. Mean	FY 2003 Adj. Mean	FY'03-FY'97	Deviation of FY'03 Mean from the Median Mean*	Significance Level	Rank
1	Northampton	17.44	16.95	-0.49	1.15		2
1	Togus		15.54		-0.01		20
1	West Haven	16.03	16.60	0.57	-0.05		21
1	White River Junction		16.15		-0.42		28
2	Batavia (Buffalo)		16.57		0.70		9
3	Bronx	15.84					
3	Lyons	17.80	15.39	-2.41	0.16		15
3	Montrose	15.41	15.60	0.19	0.26		14
4	Clarksburg	16.52	16.37	-0.15	0.52		12
4	Coatesville				0.72		8
5	Baltimore	14.33	16.34	2.01	-0.40		27
5	Martinsburg	16.63	14.92	-1.71	0.62		11
6	Salem	17.26	17.51	0.25	1.49	0.05	1
6	Salisbury	17.12	16.87	-0.25	0.99		6
7	Augusta	15.25					
7	Tuscaloosa	15.06					
7	Tuskegee	15.67					
8	Bay Pines	15.05	15.81	0.76	0.12		17
8	Miami	16.39	15.86	-0.53	-0.76		32
10	Brecksville (Cleveland)	14.75	15.33	0.58	-0.54		30
10	Cincinnati	14.92	14.84	-0.08	-0.70		31
10	Dayton	15.60	15.44	-0.16	-3.59	X 0.0001	37
11	Battle Creek	15.59	15.75	0.16	-0.28		24
12	Milwaukee		14.72		-0.35		25
12	North Chicago	16.19	16.94	0.75	1.02		3.5
12	Tomah	15.05	14.33	-0.72	-0.79		33
15	Topeka	17.47	15.86	-1.61	0.47		13
16	Jackson		15.24		-0.14		22
16	New Orleans	16.49	16.56	0.07	1.02		3.5
16	North Little Rock	15.93	15.42	-0.51	-0.39		26
17	Waco	15.07	15.47	0.40	-1.26		35
18	Tucson		17.12		0.69		10
19	Denver		16.20		0.75		7
19	Sheridan	15.30					
20	American Lake (Tacoma)	13.91	15.27	1.36	-0.45		29
20#	Boise	17.11	16.86	-0.25	0.00		19
20	Roseburg	16.14	17.00	0.86	0.94		6
20	Seattle	13.74	14.83	1.09	-1.56	X 0.03	36
21	Palo Alto	14.84	15.64	0.80	0.07		18
21	Hilo	14.99	15.33	0.34	0.13		16
23	Minneapolis	12.42					
23	Des Moines		15.09		-0.81		34
23	Hot Springs		15.92		-0.19		23
ALL VA		15.69	16.02	0.33			

Indicates the median station for FY 2003.

* X indicates that satisfaction for FY 2003 was significantly worse ($p < .05$) than for the median station.

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Appendix A

Changes in Treatment of PTSD in the Department of Veterans Affairs, FY 1995 and FY 2003¹

Since 1995 there has been a period of major change in the Veterans Health Administration (VHA). Tables presented in this report primarily focus on changes during the past year. The tables presented in this appendix, in contrast, illustrate changes in the years since the VA reorganization was implemented.

Table A1 shows changes from FY 1995-FY 2003 in the number of programs operating in each VISN. The change in number of programs shows a net increase of 19 PCTs, 1 WSDTT, 7 PTSD Day Hospitals, 3 PTSD Doms, and 5 PRRPs. Also shown, is a loss of 2 SUPTs, 12 EBTPUs and 20 SIPUs.

Table A2 presents summary workload data on the work of specialized PTSD outpatient clinics: the PTSD Clinical Team (PCT) program, the Substance Use PTSD Team (SUPT) program, and the Women's Stress Disorder Treatment Team (WSDTT) program. Overall these programs saw 130.2% more patients in FY 2003 than in FY 1995, and the intensity of contact (number of visits) increased by 16%.

Table A3 presents data on changes from FY 1995-FY 2003 in beds occupied during the end-of-the-year national census. There was a 65.7% decline in the total number of general psychiatry beds in VA; a 28.8% decrease in the number of beds used for PTSD treatment; and a 35.2% decline in length of stay. There was a 5.9% increase in the total number of domiciliary and PRRP beds in VA; a 140.9% increase in the number of beds used for PTSD treatment; and a 52.6% decrease in length of stay.

Tables A4 and A5 present data on the change in the number and percent of patients receiving inpatient and residential treatment for PTSD. VA provided a total of 6,823 episodes of inpatient treatment for PTSD in FY 2003 compared to 14,849 in FY 1995. The average length of stay declined from 27.2 days in FY 1995 to 12.3 days in FY 2003, a 54.9% reduction. VA provided a total of 3,766 episodes of domiciliary and PRRP treatment for PTSD in FY 2003 compared to 715 in FY 1995. The average length of stay declined from 112.2 days in FY 1995 to 53.0 days in FY 2003, a 52.8 % reduction.

¹ FY 1995 data not do not include PRRP care.

Table A1. VA SPECIALIZED PTSD PROGRAMS BY VISN: FY 1995, FY 2003 and FY 1995-2003 change.

Fiscal Year 2003												SUM VISN*
VISN	PCT	SUPT	WSDTT	EBTPU	PTSD DH	PTSD DOM	PRRP	SIPU	WTRP	OTHER		
1	5	2	1	0	1	0	1	1	0	0		11
2	3	0	0	0	1	0	0	0	0	0		4
3	5	0	0	0	0	2	0	0	0	0		7
4	3	1	0	0	0	0	2	0	0	0		6
5	3	0	0	0	1	1	0	0	0	0		5
6	5	0	0	0	0	0	0	2	0	0		7
7	6	0	0	0	0	0	0	0	0	0		6
8	5	0	0	0	0	1	1	0	0	0		7
9	5	0	0	0	0	0	0	0	0	0		5
10	5	0	1	0	3	0	0	0	0	0		9
11	5	0	0	0	0	0	1	0	0	0		6
12	2	0	1	0	0	1	2	0	0	0		6
15	5	0	0	0	0	0	0	1	0	0		6
16	7	0	1	0	0	1	2	0	0	0		11
17	5	0	0	0	0	0	1	0	0	0		6
18	4	0	0	1	0	0	0	0	0	0		5
19	4	0	0	0	1	0	0	0	0	0		5
20	4	0	0	2	0	1	0	1	0	0		8
21	4	1	0	0	0	0	2	0	1	0		8
22	5	0	1	0	0	0	0	0	0	0		6
23	7	1	0	0	0	0	2	0	0	0		10
ALL VA	97	5	5	3	7	7	14	5	1	0		144
AVERAGE	5	0	0	0	0	0	1	0	0	0		7
SD	1	1	0	0	1	1	1	1	0	0		2

Fiscal Year 1995												SUM VISN
VISN	PCT	SUPT	WSDTT	EBTPU	PTSD DH	PSU/PTSD Dom	PRRP	SIPU	WTRP	OTHER		
1	6	2	1	2	0	0	1	3	0	0		15
2	2	0	0	1	0	0	0	0	0	0		3
3	4	0	0	1	0	1	0	2	0	0		8
4	4	1	0	1	0	0	0	1	0	0		7
5	3	0	0	1	0	0	1	0	0	0		5
6	5	0	0	0	0	0	0	2	0	0		7
7	5	0	0	0	0	0	0	3	0	0		8
8	4	1	0	0	0	0	0	2	0	0		7
9	6	0	0	0	0	0	0	0	0	0		6
10	1	0	1	1	0	0	1	1	0	0		5
11	4	0	0	0	0	0	0	2	0	0		6
12	3	0	0	0	0	1	0	2	0	0		6
15	4	0	0	0	0	0	0	1	0	0		5
16	5	1	1	2	0	1	0	1	0	0		11
17	4	0	0	1	0	0	1	1	0	0		7
18	4	0	0	0	0	0	0	1	0	0		5
19	4	0	0	1	0	0	1	1	0	0		7
20	3	1	0	3	0	0	3	1	0	0		11
21	4	1	0	1	0	1	0	0	1	0		8
22	3	0	1	0	0	0	1	1	0	0		6
23	6	2	0	2	0	0	1	0	0	0		11
ALL VA	78	7	4	15	0	4	9	25	1	0		143
MEAN	4	0	0	1	0	0	0	1	0	0		7
SD	1	1	0	1	0	0	1	1	0	0		3

Change in number of programs												SUM VISN
VISN	PCT	SUPT	WSDTT	EBTPU	PTSD DH	PTSD Dom	PRRP	SIPU	WTRP	OTHER		
1	-1	0	0	-2	1	0	0	-2	0	0		-4
2	1	0	0	-1	1	0	0	0	0	0		1
3	1	0	0	-1	0	1	0	-2	0	0		-1
4	-1	0	0	-1	0	0	2	-1	0	0		-1
5	0	0	0	-1	1	1	-1	0	0	0		0
6	0	0	0	0	0	0	0	0	0	0		0
7	1	0	0	0	0	0	0	-3	0	0		-2
8	1	-1	0	0	0	1	1	-2	0	0		0
9	-1	0	0	0	0	0	0	0	0	0		-1
10	4	0	0	-1	3	0	-1	-1	0	0		4
11	1	0	0	0	0	0	1	-2	0	0		0
12	-1	0	1	0	0	0	2	-2	0	0		0
15	1	0	0	0	0	0	0	0	0	0		1
16	2	-1	0	-2	0	0	2	-1	0	0		0
17	1	0	0	-1	0	0	0	-1	0	0		-1
18	0	0	0	1	0	0	0	-1	0	0		0
19	0	0	0	-1	1	0	-1	-1	0	0		-2
20	1	-1	0	-1	0	1	-3	0	0	0		-3
21	0	0	0	-1	0	-1	2	0	0	0		0
22	2	0	0	0	0	0	-1	-1	0	0		0
23	1	-1	0	-2	0	0	1	0	0	0		-1
ALL VA	19	-2	1	-12	7	3	5	-20	0	0		1

Table A-2. INTENSITY DATA: SOPPs by VISN: FY 1995, FY 2003, and FY1995-2003 change.

VISN	FY 1995			FY 2003			% Change: FY 1995-2003		
	SOPPs WORKLOAD			SOPP WORKLOAD			SOPPs WORKLOAD		
	# Vets Seen	Visits	Vis/Vet	Veterans Seen	Visits	Vis/Vet*	Veterans	Visits	Vis/Vet
1	2,983	32,579	10.92	4,068	48,710	11.97	36.4%	49.5%	9.6%
2	570	7,083	12.43	992	10,519	10.60	74.0%	48.5%	-14.7%
3	1,142	17,745	15.54	3,162	39,496	12.49	176.9%	122.6%	-19.6%
4	2,125	22,253	10.47	2,997	24,327	8.12	41.0%	9.3%	-22.5%
5	758	10,866	14.34	2,174	21,308	9.80	186.8%	96.1%	-31.6%
6	1,600	15,951	9.97	3,622	24,963	6.89	126.4%	56.5%	-30.9%
7	1,231	12,687	10.31	4,359	37,963	8.71	254.1%	199.2%	-15.5%
8	1,835	16,984	9.26	3,635	27,133	7.46	98.1%	59.8%	-19.4%
9	1,163	5,307	4.56	3,076	17,307	5.63	164.5%	226.1%	23.3%
10	531	2,652	4.99	2,961	26,012	8.78	457.6%	880.8%	75.9%
11	1,480	10,818	7.31	2,134	17,861	8.37	44.2%	65.1%	14.5%
12	679	7,733	11.39	1,089	12,681	11.64	60.4%	64.0%	2.2%
15	1,332	17,460	13.11	2,879	29,780	10.34	116.1%	70.6%	-21.1%
16	3,826	36,276	9.48	9,531	82,865	8.69	149.1%	128.4%	-8.3%
17	1,231	15,789	12.83	3,124	26,690	8.54	153.8%	69.0%	-33.4%
18	1,815	18,648	10.27	4,066	31,387	7.72	124.0%	68.3%	-24.9%
19	1,062	10,339	9.74	2,402	16,396	6.83	126.2%	58.6%	-29.9%
20	1,545	20,290	13.13	5,306	50,175	9.46	243.4%	147.3%	-28.0%
21	1,197	14,456	12.08	2,952	34,827	11.80	146.6%	140.9%	-2.3%
22	917	11,315	12.34	4,051	36,855	9.10	341.8%	225.7%	-26.3%
23	2,341	26,642	11.38	3,254	28,640	8.80	39.0%	7.5%	-22.7%
ALL VA	31,074	333,873	10.74	71,538	645,895	9.03	130.2%	93.5%	-16.0%
AVERAGE	1,493	15,899	10.75	3,421	30,757	9.13	150.5%	133.0%	-10.7%
SD	806	8,458	2.72	1,730	15,982	1.83	105.1%	182.5%	25.5%
CV	0.54	0.53	0.25	0.51	0.52	0.20	0.70	1.37	-2.38

Table A3. Occupied Psychiatry, Domiciliary, and PRRP Beds with Primary Diagnosis of PTSD, by VISN: FY 1995, FY 2003, and FY 1995-2003 change, Annual VA Census.

VISN	FY 1995								FY 2003								% Change: FY 1995-2003							
	Inpatient PTSD Treatment				Domiciliary and PRRP Treatment†				Inpatient PTSD Treatment				Domiciliary and PRRP Treatment				Inpatient PTSD Treatment				Domiciliary and PRRP Treatment			
	Psych. Beds	PTSD Pts.	Pct. PTSD	LOS	PRRP Beds	PTSD Pts.	Pct. PTSD	LOS	Psych. Beds	PTSD Pts.	Pct. PTSD	LOS	PRRP Beds	PTSD Pts.	Pct. PTSD	LOS	Psych. Beds	PTSD Pts.	Pct. PTSD	LOS	PRRP Beds	PTSD Pts.	Pct. PTSD	LOS
1	796	66	8.3%	47.1	82	2	2.4%	95.5	325	31	9.5%	17.4	167	16	9.6%	104.3	-59.2%	-53.0%	14.9%	-63.1%	103.7%	700.0%	292.8%	9.2%
2	311	16	5.1%	13.3	324	1	0.3%	282.0	62	2	3.2%	3.5	286	12	4.2%	20.1	-80.1%	-87.5%	-36.7%	-73.7%	-11.7%	1100.0%	1259.4%	-92.9%
3	857	47	5.5%	47.2	173	2	1.2%	149.0	180	4	2.2%	5.5	320	50	15.6%	37.7	-79.0%	-91.5%	-59.6%	-88.3%	85.0%	2400.0%	1251.6%	-74.7%
4	582	78	13.4%	27.5	170	0	0.0%	0.0	195	1	0.5%	4.0	376	33	8.8%	40.9	-66.5%	-98.7%	-96.2%	-85.5%	121.2%			
5	287	9	3.1%	27.1	284	51	18.0%	118.8	116	3	2.6%	8.3	430	74	17.2%	84.6	-59.6%	-66.7%	-16.6%	-69.2%	51.4%	45.1%	-4.2%	-28.8%
6	412	28	6.8%	29.6	254	7	2.8%	64.6	253	38	15.0%	24.2	169	1	0.6%	28.0	-38.6%	35.7%	120.9%	-18.4%	-33.5%	-85.7%	-78.5%	-56.6%
7	794	156	19.6%	19.0	229	7	3.1%	203.9	182	12	6.6%	28.6	145	39	26.9%	41.6	-77.1%	-92.3%	-66.4%	50.4%	-36.7%	457.1%	779.9%	-79.6%
8	380	54	14.2%	35.4	141	1	0.7%	365.0	112	9	8.0%	7.8	169	30	17.8%	26.4	-70.5%	-83.3%	-43.4%	-78.0%	19.9%	2900.0%	2403.0%	-92.8%
9	334	12	3.6%	15.0	443	4	0.9%	215.0	137	5	3.6%	7.0	317	5	1.6%	262.0	-59.0%	-58.3%	1.4%	-53.3%	-28.4%	25.0%	74.7%	21.9%
10	301	19	6.3%	23.5	415	22	5.3%	44.8	68		0.0%		330	21	6.4%	34.2	-77.4%	-100.0%	-100.0%	-100.0%	-20.5%	-4.5%	20.0%	-23.6%
11	779	47	6.0%	22.0					205	8	3.9%	16.9	100	24	24.0%	12.2	-73.7%	-83.0%	-35.0%	-23.3%				
12	606	44	7.3%	36.0	412	15	3.6%	156.1	113	11	9.7%	39.2	532	49	9.2%	64.3	-81.4%	-75.0%	33.3%	8.8%	29.1%	226.7%	153.0%	-58.8%
13	371	47	12.7%	49.3	181	0	0.0%		156	29	18.6%	34.2	234	6	2.6%	78.3	-58.0%	-38.3%	46.4%	-30.6%	29.3%			
14	487	43	8.8%	15.1	243	12	4.9%	112.6	283	11	3.9%	21.0	263	30	11.4%	30.2	-41.9%	-74.4%	-55.8%	39.1%	8.2%	150.0%	131.0%	-73.2%
15	183	17	9.3%	14.2	677	17	2.5%	102.1	133	15	11.3%	32.1	628	31	4.9%	100.1	-27.3%	-11.8%	21.3%	125.8%	-7.2%	82.4%	96.6%	-1.9%
16	164	36	22.0%	20.8	125	2	1.6%	199.0	77	8	10.4%	7.1	134	2	1.5%	46.0	-53.0%	-77.8%	-52.8%	-65.7%	7.2%	0.0%	-6.7%	-76.9%
17	252	44	17.5%	48.3					98	8	8.2%	18.1	37	6	16.2%	29.3	-61.1%	-81.8%	-53.4%	-62.5%				
18	182	55	30.2%	21.3	908	29	3.2%	228.7	121	31	25.6%	14.1	626	22	3.5%	101.0	-33.5%	-43.6%	-15.2%	-33.7%	-31.1%	-24.1%	10.0%	-55.8%
19	243	91	37.4%	88.7	45	0	0.0%		86	5	5.8%	17.2	152	48	31.6%	32.7	-64.6%	-94.5%	-84.5%	-80.6%	237.8%			
20	347	30	8.6%	27.2	208	18	8.7%	94.3	146	3	2.1%	124.3	199	18	9.0%	133.4	-57.9%	-90.0%	-76.1%	357.1%	-4.3%	0.0%	4.5%	41.5%
21	390	26	6.7%	36.8	318	24	7.5%	66.6	62	2	3.2%	17.0	352	29	8.2%	71.0	-84.1%	-92.3%	-51.6%	-53.8%	10.7%	20.8%	9.2%	6.6%
22																								
23																								
ALL VA	9,058	965	10.7%	35.1	5,632	214	3.8%	124.8	3,110	236	7.6%	22.7	5,966	546	9.2%	59.2	-65.7%	-75.5%	-28.8%	-35.2%	5.9%	155.1%	140.9%	-52.6%
AVERAGE	412	44	11.8%	32.0	295	11	3.3%	135.1	148	12	7.3%	22.4	284	26	11.0%	65.6	-61.0%	-68.3%	-27.7%	-17.2%	28.8%	531.5%	425.8%	-42.9%
S.D.	220	33	8.6%	18.0	210	13	4.2%	97.8	73	11	6.4%	26.2	164	19	8.7%	55.9	15.4%	32.6%	53.4%	101.9%	68.3%	891.9%	681.3%	41.9%
C.V.	0.53	0.74	0.73	0.56	0.71	1.23	1.27	0.72	0.49	0.95	0.87	1.17	0.58	0.72	0.79	0.85	-0.25	-0.48	-1.93	-5.91	2.37	1.68	1.60	-0.98

† Only includes domiciliary beds.

Table A4. Patients treated for PTSD in general psychiatry inpatient beds and domiciliary and PRRP beds by VISN: FY 1995, FY 2003, and FY 1995-2003 change.

	General Psychiatry Inpatient Care												Domiciliary and PRRP Care											
	FY 1995				FY 2003				Change				FY 1995†				FY 2003				Change			
	Episodes of Care	Unique Veterans	Bed Days/ Episode	Bed Days/ Vet/Year	Episodes of Care	Unique Veterans	Bed Days/ Episode	Bed Days/ Vet/Year	Episodes of Care	Unique Veterans	Bed Days/ Episode	Bed Days/ Vet/Year	Episodes of Care	Unique Veterans	Bed Days/ Episode	Bed Days/ Vet/Year	Episodes of Care	Unique Veterans	Bed Days/ Episode	Bed Days/ Vet/Year	Episodes of Care	Unique Veterans	Bed Days/ Episode	Bed Days/ Vet/Year
1	1,299	906	25.7	37.2	724	555	15.3	19.9	-44.3%	-38.7%	-40.6%	-46.5%	1	1	53.0	53.0	47	45	82.7	86.4	4600.0%	4400.0%	56.1%	63.1%
2	415	295	20.3	28.6	116	97	9.5	11.4	-72.0%	-67.1%	-53.0%	-60.1%	11	11	142.8	142.8	298	225	13.4	17.8	2609.1%	1945.5%	-90.6%	-87.6%
3	699	552	38.1	47.7	198	176	11.8	13.3	-71.7%	-68.1%	-69.0%	-72.2%	22	22	124.0	124.0	330	317	58.5	60.9	1400.0%	1340.9%	-52.8%	-50.8%
4	839	597	33.5	47.1	207	183	10.7	12.1	-75.3%	-69.3%	-68.2%	-74.4%	11	10	113.6	125.0	189	184	60.4	62.0	1618.2%	1740.0%	-46.9%	-50.4%
5	184	135	19.4	24.8	158	136	7.3	8.4	-14.1%	0.7%	-62.5%	-66.0%	145	139	117.9	123.0	266	254	90.3	94.6	83.4%	82.7%	-23.4%	-23.1%
6	1,179	691	13.9	24.3	997	743	14.2	19.0	-15.4%	7.5%	2.0%	-21.7%	34	30	88.2	100.0	5	5	10.0	10.0	-85.3%	-83.3%	-88.7%	-90.0%
7	2,031	1,404	31.5	45.5	599	475	8.1	10.3	-70.5%	-66.2%	-74.2%	-77.5%	19	17	114.4	127.9	238	224	42.3	45.0	1152.6%	1217.6%	-63.0%	-64.8%
8	776	589	27.4	36.7	290	233	5.8	7.2	-62.6%	-60.4%	-78.9%	-80.4%	4	4	90.0	90.0	201	194	62.4	64.7	4925.0%	4750.0%	-30.6%	-28.1%
9	460	318	13.7	18.5	286	228	8.7	10.9	-37.8%	-28.3%	-36.7%	-41.2%	14	13	173.4	186.8	13	13	93.4	93.4	-7.1%	0.0%	-46.2%	-50.0%
10	321	251	22.0	28.8	119	106	8.0	9.0	-62.9%	-57.8%	-63.6%	-68.8%	93	91	70.8	72.4	152	147	52.5	54.3	63.4%	61.5%	-25.8%	-25.0%
11	684	490	25.1	35.1	145	122	11.8	14.0	-78.8%	-75.1%	-53.0%	-60.1%					380	308	22.7	28.0				
12	591	416	32.9	46.2	235	183	9.7	12.5	-60.2%	-56.0%	-70.5%	-73.0%	13	12	146.2	158.4	375	331	42.2	47.8	2784.6%	2658.3%	-71.1%	-69.8%
15	746	493	30.8	46.0	360	298	30.2	36.5	-51.7%	-39.6%	-1.8%	-20.6%	3	3	268.7	268.7	9	7	174.6	224.4	200.0%	133.3%	-35.0%	-16.5%
16	891	704	22.8	28.6	347	293	11.9	14.1	-61.1%	-58.4%	-47.7%	-50.6%	31	31	104.6	104.6	308	302	37.6	38.4	893.5%	874.2%	-64.0%	-63.3%
17	587	403	15.1	22.7	302	229	13.2	17.4	-48.6%	-43.2%	-12.7%	-23.4%	38	36	143.1	151.0	147	139	86.1	91.1	286.8%	286.1%	-39.8%	-39.7%
18	380	299	24.9	34.5	261	229	10.6	12.1	-31.3%	-23.4%	-57.3%	-64.9%	4	4	70.0	70.0	4	4	31.3	31.3	0.0%	0.0%	-55.4%	-55.4%
19	513	367	38.3	52.4	315	287	8.7	9.5	-38.6%	-21.8%	-77.4%	-81.9%					56	54	37.4	38.8				
20	856	669	24.0	31.8	762	640	13.5	16.0	-11.0%	-4.3%	-43.9%	-49.6%	55	51	157.9	170.2	160	155	64.0	66.0	190.9%	203.9%	-59.5%	-61.2%
21	599	482	53.0	63.5	129	113	8.4	9.6	-78.5%	-76.6%	-84.1%	-84.9%	0	0	0.0		262	255	56.5	58.1				
22	358	288	25.0	30.7	144	127	9.0	10.2	-59.8%	-55.9%	-64.1%	-66.8%	71	71	141.3	141.3	93	92	143.1	144.6	31.0%	29.6%	1.3%	2.4%
23	441	317	42.8	60.9	129	110	5.0	5.8	-70.7%	-65.3%	-88.4%	-90.4%	146	142	184.5	192.5	233	208	60.5	67.8				
All VA	14,849	10,666	27.2	37.8	6,823	5,492	12.3	15.2	-54.1%	-48.5%	-54.9%	-59.7%	715	682	112.2	117.7	3,766	3,399	53.0	58.7	426.7%	398.4%	-52.8%	-50.1%
AVG.	675	485	26.4	36.0	325	265	11.0	13.3	-52.3%	-45.1%	-52.9%	-59.2%	36	34	115.2	120.1	179	165	63.0	67.9	1220.4%	1155.3%	-43.3%	-41.8%
S.D.	412	280	8.9	10.9	243	185	5.2	6.5	21.1%	25.1%	24.1%	19.5%	39	38	52.9	54.4	125	112	39.8	47.1	1563.2%	1481.6%	33.6%	35.5%
C.V.	0.61	0.58	0.34	0.30	0.75	0.70	0.47	0.49	-0.40	-0.56	-0.46	-0.33	1.10	1.11	0.46	0.45	0.70	0.68	0.63	0.69	1.28	1.28	-0.78	-0.85

† Only includes domiciliary beds.

Table A5. Percent treated for PTSD by VISN: FY 1995, FY 2003, and FY 1995-2003 change.

VISN	Inpatient General Psychiatry						Domiciliary and PRRP					
	FY 1995		FY 2003		% Change: FY 1995-2002		FY 1995†		FY 2003		% Change: FY 1995-2002	
	Percent Tx. for PTSD		Percent Tx. for PTSD		Percent Tx. for PTSD		Percent Tx. for PTSD		Percent Tx. for PTSD		Percent Tx. for PTSD	
	All Episodes	Unique Veterans	All Episodes	Unique Veterans	All Episodes	Unique Veterans	All Episodes	Unique Veterans	All Episodes	Unique Veterans	All Episodes	Unique Veterans
1	18.1%	20.3%	15.8%	17.9%	-12.9%	-12.1%	0.5%	0.5%	5.3%	6.0%	903.7%	993.6%
2	13.7%	15.9%	5.9%	7.2%	-56.8%	-54.8%	2.4%	2.6%	19.6%	18.3%	726.3%	602.3%
3	10.9%	13.8%	5.6%	7.1%	-48.8%	-48.3%	5.2%	5.4%	15.8%	18.2%	203.0%	240.0%
4	13.1%	16.4%	5.9%	7.3%	-55.0%	-55.3%	1.8%	1.6%	7.3%	7.6%	313.7%	368.5%
5	6.5%	7.6%	4.0%	5.7%	-38.3%	-25.1%	35.5%	35.1%	15.5%	16.7%	-56.4%	-52.3%
6	16.4%	16.3%	15.6%	17.3%	-5.0%	6.2%	4.2%	4.1%	0.3%	0.3%	-92.6%	-91.7%
7	24.1%	26.7%	11.9%	13.6%	-50.7%	-49.0%	4.3%	4.2%	32.2%	32.0%	653.3%	669.1%
8	9.7%	11.1%	4.9%	5.7%	-49.9%	-48.8%	1.2%	1.3%	19.9%	21.2%	1563.4%	1582.1%
9	8.8%	9.1%	5.6%	6.3%	-35.9%	-30.4%	2.0%	2.1%	1.5%	1.6%	-24.6%	-22.7%
10	8.4%	10.1%	3.4%	4.3%	-59.1%	-57.0%	6.0%	6.4%	5.1%	5.9%	-13.8%	-7.1%
11	12.1%	13.3%	3.9%	4.7%	-67.5%	-64.9%			40.9%	39.4%		
12	10.6%	12.6%	5.8%	6.9%	-45.6%	-45.5%	1.9%	1.9%	15.8%	15.9%	713.6%	754.1%
15	12.6%	13.6%	7.7%	9.1%	-38.9%	-33.4%	1.0%	1.1%	1.9%	1.6%	90.3%	47.1%
16	11.8%	13.2%	4.6%	5.3%	-60.8%	-59.6%	3.9%	4.1%	21.3%	22.1%	447.7%	445.3%
17	11.1%	12.7%	6.9%	7.4%	-38.2%	-41.6%	3.7%	4.0%	5.9%	7.1%	57.6%	79.4%
18	10.1%	12.3%	9.0%	11.7%	-10.7%	-4.6%	0.8%	1.0%	0.6%	0.7%	-25.4%	-31.1%
19	19.6%	22.4%	13.5%	16.7%	-31.3%	-25.3%			15.7%	16.1%		
20	21.0%	24.8%	20.5%	23.7%	-2.5%	-4.5%	4.1%	4.2%	8.5%	8.9%	108.7%	114.1%
21	14.1%	18.5%	4.3%	5.6%	-69.9%	-69.5%	0.0%	0.0%	37.0%	38.6%		
22	5.8%	7.6%	3.9%	4.7%	-33.4%	-38.4%	9.4%	9.5%	12.6%	12.8%	34.0%	34.8%
23	16.1%	17.8%	3.7%	4.7%	-76.8%	-73.6%	38.8%	39.0%	10.6%	10.8%	-72.7%	-72.3%
All VA	12.9%	14.8%	7.8%	9.4%	-39.2%	-36.8%	5.8%	6.0%	12.5%	13.0%	115.3%	117.1%
Avg.	12.5%	14.4%	7.7%	9.2%	-42.1%	-39.6%	6.0%	6.1%	14.0%	14.4%	297.1%	303.7%
S.D.	4.7%	5.3%	4.8%	5.5%	20.1%	21.4%	9.3%	9.3%	11.6%	11.6%	425.7%	433.0%
C.V.	0.37	0.37	0.63	0.60	-0.48	-0.54	1.54	1.52	0.83	0.80	1.43	1.43

† Only includes domiciliary beds.

Appendix B

Summary of Special Emphasis Program Goals

This Appendix recapitulates the goals for special emphasis programs for PTSD as presented in VHA Directive 96-051, *Veterans Health Administration Special Emphasis Programs*. We have modified Population Measures 1 - 3 and Program Measure 2 and added Population Measure 6 with the approval of the Clinical Quality Improvement Specialist, Office of Performance and Quality, VA Headquarters. Population Measures 4 and 5 and Program Measures 1 and 3 remain unchanged. Population Measures 1, 2, 3 and 6 specify outcome goals for PTSD, substance abuse, work and violence. We have introduced technical modifications to the meeting of these goals so that the methods used are consistent with the methods used elsewhere in the National Mental Health Program Performance Monitoring System (Rosenheck & DiLella, 1998; Kaspro et al., 1997; Seibyl et al., 1997).

Population Measure 1 as modified is:

Change in PTSD symptoms on the short form of the Mississippi Scale from admission to follow-up 4 months after discharge.

Goal: Program not significantly worse than the median program.

Our experience in monitoring outcomes suggests that alcohol abuse and drug abuse should be considered separately. Outcomes for the two are not related highly to each other, despite them both being forms of substance abuse; combining them masks some differences among programs. Therefore, **Population Measure 2** is modified by splitting it into two Measures, as follows:

Change in alcohol abuse symptoms as measured by the Alcohol Abuse Composite of the Addiction Severity Index from admission to follow-up 4 months after discharge.

Goal: Program not significantly worse than the median program.

Change in drug abuse symptoms as measured by the Drug Abuse Composite of the Addiction Severity Index from admission to follow-up 4 months after discharge.

Goal: Program not significantly worse than the median program.

Population Measure 3 as modified is:

Change in occupational functioning as measured by the number of days employed or the number of dollars earned from work during the past 30 days from admission to follow-up 4 months after discharge.

Goal: Program not significantly worse than the median program.

Population Measure 4, unmodified, is:

Proportion of veterans in need of PTSD care treated for PTSD in VA outpatient mental health clinics in each year.

Goal: Fifty-five percent.

Population Measure 5, unmodified, is:

Proportion of veterans who receive a psychiatric outpatient visit within 30 days of discharge from an inpatient program.

Goal: Greater than 51%.

Population Measure 6, newly added, is:

Change in violence as measured by the Violence Scale as modified from the National Vietnam Veterans Readjustment Study from admission to follow-up 4 months after discharge.

Goal: Program not significantly worse than the median program.

Program Measure 1, unmodified, is:

Proportion of veterans successfully contacted for outcome assessment after discharge from an inpatient PTSD program.

Goal: 50%.

Program Measure 2 has been changed from “Number of patients seen...” to “Number of patients treated...” It is possible for programs to screen a large number of veterans with one contact each, without providing meaningful treatment in the process. The criterion for treatment to consist of more than one contact provides a lenient definition of treatment and, at the same time, eliminates the potential reward for focusing on performing a large number of screening contacts with limited benefit to the veterans involved. Program Measure 2 now is:

Number of patients treated (that is, seen more than once) per filled FTEE in the outpatient PTSD program (including facility contributed FTEE).

Goal: 75 patients/filled FTEE.

Program Measure 3, unmodified, is:

Number of hospital days for patients in the 6 months after discharge from an inpatient PTSD program.

Goal: Less than 13.5 days.

Appendix C

Calculation of **FILLED FTEE** and **DIRECT COST**

Appendix C is a description of the procedure for calculating **FILLED FTEE** (tables 3-1, 3-2, 3-5, 3-6, 3-7, and 3-8) and **DIRECT COST** (Part I, tables 4 and 5; tables 3-9, 3-10, 3-11, 3-12) for Specialized PTSD Programs.

Filled FTEE and Direct Cost are calculated from data supplied from the *Specialized PTSD Programs Annual Report*. These data include the following items from Parts 2 and 5 on the Annual Report form: Part 2 - "Total Recurring All Other Funds Expended up to \$9999.00"; Part 5, item c - "Start and End Dates", which are used to determine time worked for the VA facility; Part 5, item d - "Number of Hours Worked Per Pay Period for the Facility"; Part 5, item e - "Actual Salary Plus Benefits Paid for Work at the Facility for this Fiscal Year"; Part 5, item f, "Start and End Dates", which are used to determine time worked for the program; and Part 5, item g - "Total Number of Hours Committed Per Week to the Program".

Steps for calculating **FILLED FTEE**:

1. Using the program Start Date and End Date (item "f", for *each* of the completed sections numbered 1-48, Part 5 of the Annual Report) determine the total number of days worked during the fiscal year for the program. Divide the total number of days by 364 to determine the ***Portion of the Fiscal Year Worked for the Program***.
2. Divide the Number of Hours Committed Per Week to the Program (item "g", for *each* of the completed sections numbered 1-48, in Part 5 of the Annual Report) by 40 to determine the ***Portion of A Full FTEE Worked for the Program During The Fiscal Year***.
3. Multiply the Portion of the Fiscal Year Worked for the Program by the Portion of A Full FTEE Worked for the Program During The Fiscal Year to determine the ***Filled Program FTEE*** for each individual staff member.
4. For Specialized Outpatient PTSD Programs, sum the Filled Program FTEE for each staff member within a program to determine the total ***FILLED FTEE***, for each program (tables 3-1, 3-2, 3-5 and 3-6).
4. For Specialized Intensive PTSD Programs, sum the Filled Program FTEE for each staff member across programs at a facility to determine the total ***FILLED FTEE***, for each facility (tables 3-3, 3-4, 3-7 and 3-8).

Steps for calculating ***DIRECT COST***:

1. Using the facility Start Date and End Date (item "c", for *each* of the completed sections numbered 1-48, Part 5 of the Annual Report) determine the total number of days worked during the fiscal year for the facility. Divide the total number of days by 364 to determine the ***Portion of the Fiscal Year Worked for the Facility***.
2. Divide the Number of Hours Worked Per Pay Period for the Facility (item "d", for *each* of the completed sections numbered 1-48, Part 5 of the Annual Report) by 80 to determine the ***Portion of A Full FTEE Worked for the Facility During the Fiscal Year***.
3. Multiply the Portion of the Fiscal Year Worked for the Facility by the Portion of A Full FTEE Worked for the Facility During The Fiscal Year to determine the ***Filled Facility FTEE*** for each individual staff member.
4. Multiply the Actual Salary Plus Benefits Paid by the factor $[1/\text{Filled Facility FTEE}]$ to determine the ***Full-time Equivalent Salary & Benefits for working at the facility*** for each individual staff member.
5. Multiply the Full-time Equivalent Salary & Benefits by the Filled Program FTEE to determine ***Actual Salary & Benefits for the Program*** for each individual staff member.
6. For Specialized Outpatient PTSD Programs, sum the Actual Salary & Benefits for the Program for each staff member reported in the Annual Report and the Total Recurring All Other Funds to determine Total Program Dollars or ***DIRECT COST***, by program (tables 3-9 and 3-10).
7. For Specialized Intensive PTSD Programs, sum the Actual Salary & Benefits for the Program for each staff member reported in the Annual Report and the Total Recurring All Other Funds to determine Total Program Dollars, for each program. Then sum the Total Program Dollars for each program at a facility to determine the ***DIRECT COST***, for the facility (tables 3-11 and 3-12).

Appendix D

Programs with Inadequate Data*

There were no Specialized Intensive PTSD Programs with inadequate data for fiscal year 2003.

Appendix E

Treatment of PTSD Inside and Outside of Specialized Programs

Appendix E presents information regarding differentiation of treatment in different types of settings in VA, as specified in VHA Directive 2000-004, “Definition of Levels of Specialization in Post-Traumatic Stress Disorder (PTSD) Services”. This directive delineates the types of outpatient PTSD services available in VA, both inside and outside of specialized programs.

Table E1 presents the total number of unique veterans with a primary diagnosis of PTSD who received outpatient PTSD treatment in the VA system for FY 2003, by VISN. These veterans are separated first by all veterans who received any treatment from a Specialized Outpatient PTSD Program (62,270). Of the remaining veterans, those who received any treatment from a PTSD Specialist (15,536) were counted. Then, of the remaining veterans, those who received any treatment from a mental health program (122,856) were counted. Those remaining are the veterans who received outpatient treatment only from a non-mental health program (21,279). Across these groups, each veteran with a primary diagnosis of PTSD who received specialized outpatient treatment in VA is counted only once.

Table E-2 presents the total number of veterans who, regardless of primary diagnosis, received outpatient individual and group treatment from PTSD specialists by VISN, and the number of visits those veterans received, for FY 2003.

Table E3 presents the number of unique veterans who, regardless of primary diagnosis, received outpatient individual and group treatment from PTSD Specialists by facility, and the number of visits those veterans received, for FY 2003. Table E3 also indicates if a Specialized Outpatient PTSD Program (PCT, SUPT or WSDTT) was operating at each of those facilities during FY 2003.

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**DEFINITION OF LEVELS OF SPECIALIZATION IN
POST-TRAUMATIC STRESS DISORDER (PTSD) SERVICES**

1. PURPOSE: This Veterans Health Administration (VHA) Directive provides working definitions to assist in clearly identifying VHA strategy in providing both specialized and general Post-traumatic Stress Disorder (PTSD) services.

2. BACKGROUND

a. Public Law 104-262, the Veterans Healthcare Eligibility Reform Act of 1996, §1706(b)(1), requires VHA to maintain its capacity to provide for the specialized treatment and rehabilitation needs of disabled veterans (including those with ... mental illness) within distinct programs or facilities...that are dedicated to the specialized needs of those veterans..."

b. The "Report to Congress on Maintaining Capacity to Provide for the Specialized Treatment and Rehabilitation Needs of Disabled Veterans," dated May 1, 1997, defines the overall group of disabled mentally ill veterans into two main groups: those diagnosed with a serious mental illness (SMI) and those diagnosed with PTSD. This Directive addresses the latter group.

c. In order to obtain a wider range of views in formulating a VHA-wide approach, on March 25, 1999, the Office of the Under Secretary appointed a Seriously and Chronically Mentally Ill (SCMI) Strategic Implementation Committee composed of four Clinical Managers, a medical center Director, a Mental Health Care Line Director, the National Director of the Northeast Program Evaluation Center (NEPEC), a representative of Vietnam Veterans Association, and a representative of the Mental Health Strategic Healthcare Group.

d. This Directive differentiates among general, specialty, and special program designation within the Mental Health service area. The Directive identifies distinctions of each and the accountability expected from a designated special program. Described here are the definitions of each and the general levels of expertise of the staff providing care in each area. To assist in clearly identifying VHA strategy in providing PTSD services, this Directive specifically applies the general principles agreed upon to PTSD services.

3. POLICY: It is VHA policy to use the definitions in subparagraph 4.a. to distinguish specialized PTSD programs from general PTSD care at all facilities and to use the appropriate Treating Specialty Codes and Decision Support System (DSS) Identifiers, as described, to record workload starting in Fiscal Year (FY) 2000.

4. ACTIONS

a. **Definitions.** The following definitions are to be used by all facilities:

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(1) **Specialized PTSD Treatment Programs.** To qualify as a Specialized PTSD Treatment Program, the program must:

(a) Have a designated program leader who has the responsibility and authority to lead and manage the team as well as to provide clinical evaluations of care.

(b) Be composed of providers (more than a single provider) in one location who are experts in the care of PTSD, with their expertise acquired through education, training, and supervision of care. These providers form a team whose team members spend the preponderance of their time caring for veterans with PTSD needing specialized services. To ensure that a veteran who is enrolled in the special program has continuous access to a team provider, the team must be of sufficient size to cover for staff absences.

NOTE: Specialized PTSD Programs may have, in addition, team members who are at remote access points and/or facilities. These members should be maintaining an active consultative relationship with the core team members, sharing in the discussion of patients and continuing education activities.

(c) Be visibly identified by patients as a program. To enable this identification, the core team members should be located in close proximity to each other.

(d) Participate in the mandated national program evaluation for specialized PTSD treatment programs.

(e) Enter data into designated bed section codes and clinics with special DSS identifiers. These include:

1. Patient Treatment File (PTF) Treating Specialty Codes 26, 38, 79, 88 and 91; and
2. The following DSS Identifiers:
 - a. 519 (Substance Use Disorder and/or PTSD teams),
 - b. 525 (Women's Stress Disorder Teams),
 - c. 540 (PCT Post-traumatic Stress, Individual),
 - d. 561 (PCT-Post-traumatic Stress, Group),
 - e. 580 (PTSD Day Hospital), and
 - f. 581 (PTSD Day Treatment).

NOTE: For Specialized PTSD inpatient programs that include a significant outpatient clinical team (e.g., over one Full-time Employee Equivalent (FTEE)), the outpatient component should

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use DSS Identifiers for PCTs (540 and 561) to record outpatient visits. In addition, the outpatient component needs to participate in the national program evaluation for specialized PTSD treatment programs as a PCT.

(2) Specialty PTSD Care Outside of a Specialized Program. Specialty PTSD care outside of a specialized program is identified by:

(a) A provider recognized as a specialist, through designation in the provider's clinical privileges, scope of practice statement, or core competencies as set forth in the medical staff by-laws and/or general personnel practices, or through specific designation as a specialist by the care line director or service chief. The provider is required to demonstrate annual continuing education activities in the diagnosis and treatment of PTSD.

(b) The provider maintaining accepted levels of expertise for the specialty care of patients with PTSD. **NOTE:** *The usual review established by the medical staff bylaws and facility will be utilized to certify continued practice. The clinician must see an adequate number of cases to maintain expertise; the adequate number of cases to be determined by the care line director or service chief.*

(c) PTSD specialists, not associated with a specialized PTSD treatment program, entering outpatient workload into clinics with the following DSS identifiers:

1. 516 (PTSD, Group),
2. 562 (PTSD, Individual),
3. 524 (Active Duty Sex Trauma), and
4. 589 (Non-active Duty Sex Trauma).

(3) General Mental Health Care. General Mental Health Care is defined as:

(a) Care provided by Mental Health practitioners who are not specially, or extensively, trained in PTSD treatment or whose focus of care is generalized. These clinicians:

1. Provide routine screening and treatment to patients with PTSD in milder forms and/or who have other co-existing mental illness.
2. Identify care provided for PTSD by recording PTSD as the diagnosis on the encounter form.
3. Utilize PTSD specialty consultation or referral for exacerbation of PTSD symptoms not resolved with general interventions or where clinically indicated.

(b) Care by non-Mental Health practitioners. These clinicians:

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1. Provide care for PTSD and its symptomatic manifestations as part of general or primary care practice.

2. Identify care provided for PTSD by recording PTSD as the diagnosis on the encounter form.

3. Utilize PTSD specialty consultation or referral for exacerbation of PTSD symptoms not resolved with general interventions or where clinically indicated.

b. **Responsibilities.** Responsibilities are defined as follows:

(1) **Facility or Care Line Actions.** The facility Director, or designee, is responsible for:

(a) Identifying and reviewing specialist skills, through designation in the specialist's clinical privileges, scope of practice statement or core competencies as set forth in the medical staff bylaws and/or general personnel practices, or through specific designation by their care line director or service chief as a specialist, required to demonstrate annual continuing education activities in the diagnosis and treatment for PTSD. *NOTE: This designation must meet usual standards of practice and review criteria.*

(b) Using National DSS identifiers and bed section conventions to designate specialized PTSD programs and specialty PTSD care.

(c) Providing complete nationally-adopted monitoring information for specialized programs in a timely manner.

(2) **Monitoring by NEPEC.** The NEPEC is responsible for:

(a) Producing periodic reports on the structure, process, and outcome of PTSD services.

(b) Providing population-based data on the availability and access to specialized PTSD Programs, PTSD Specialty Care, and PTSD general care.

1. The population estimates for assessment of the availability and access to specialized PTSD programs will be calculated as follows:

a. **Numerators.** Numerators are the number of unique veterans in specialized PTSD programs (any designated PTSD specialized program) weighted for intensity of such services.

b. **Denominators.** Denominators are the number of veterans in the network who are service-connected for PTSD.

2. Reports will be generated that characterize access to PTSD specialty care, and where data is available, contract services for PTSD.

(3) **Veterans Integrated Services Network (VISN) Actions.** The VISN Director, or designee, is responsible for:

- (a) Providing PTSD services based on an assessment of population-based need.
- (b) Establishing strategies to provide Network enrollees access to PTSD specialized programs.

NOTE: If access to specialized PTSD programs is to be provided outside the geographic VISN boundaries or contractually, a written plan and formal contract relationship is to be developed and reviewed by the VHA Mental Health Strategic Healthcare Group.

- 5. **REFERENCES:** VHA Program Guide 1103.3, June 3, 1999, pages 26-30, 61-65.
- 6. **FOLLOW-UP RESPONSIBILITY:** The Chief Consultant, Mental Health Strategic Healthcare Group (116) is responsible for the contents of this Directive.
- 7. **RESCISSION:** None. This VHA Directive expires February 28, 2005.

S/ Melinda Murphy for
Thomas L. Garthwaite, M.D.
Deputy Under Secretary for Health

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Table E-1. VA PTSD Outpatient Treatment by Specialized Programs, PTSD Specialists, Mental Health and Non-Mental Health Stops, by VISN, FY 2003.

VISN	Specialized Outpatient PTSD Programs*	PTSD Specialists**	Mental Health Non-Specialized Stops***	Non-Mental Health Stops****
	#Unique Veterans	#Unique Veterans	#Unique Veterans	#Unique Veterans
1	3,680	713	8367	1641
2	943	845	4079	657
3	3,154	868	5221	602
4	2,619	680	7039	964
5	1,636	242	3446	490
6	3,440	316	8384	1143
7	3,822	2,694	9040	1201
8	3,431	1,005	9470	1240
9	2,455	242	5809	859
10	3,450	414	3068	778
11	1,885	544	3083	457
12	1,083	1,802	3428	586
15	2,642	285	4575	940
16	7,791	1,041	8403	1787
17	2,666	370	6397	1307
18	3,598	984	5111	1503
19	1,575	210	4192	997
20	4,331	463	7917	1359
21	2,348	478	7474	1266
22	3,394	704	6314	1163
23	2,624	738	3230	474
SUM	62,567	15,638	124,047	21,414
All VA	62,270	15,536	122,856	21,279

*Specialized Outpatient PTSD Program (SOPP) visits are defined by the following outpatient file stop codes: PCT individual 540 and PCT group 561, SUPT individual and group 519, and WSDTT 525.

**PTSD Specialist visits are defined by outpatient file stop codes 516 for group and 561 for individual visits.

***Mental Health Non-Specialized stops: General psychiatry outpatient visits are defined by outpatient file stop codes 501-506; 509-512; 515-516, 520-521, 524, 529, 531-533, 535, 541, 550-554, 557-566; 573-578; 580-590).

****Any outpatient stop code other than those specified in the groups above.

Table E-2. VA PTSD Outpatient Treatment by PTSD Specialists,
by VISN, FY 2003*.

VISN	VISITS	#UNIQUE VETERANS	#Visits/ Veteran
1	15,743	977	16.1
2	5,422	366	14.8
3	24,998	1,387	18.0
4	8,468	682	12.4
5	15,720	1,501	10.5
6	14,115	1,426	9.9
7	22,328	1,595	14.0
8	16,701	1,702	9.8
9	9,804	1,046	9.4
10	9,653	795	12.1
11	6,723	729	9.2
12	6,499	364	17.9
15	17,097	979	17.5
16	51,697	3,873	13.3
17	14,308	992	14.4
18	17,530	1,308	13.4
19	4,893	387	12.6
20	26,359	2,414	10.9
21	17,634	1,123	15.7
22	22,669	1,977	11.5
23	10,570	1,055	10.0
SUM	338,931	26,678	12.7

*Entries from Austin Outpatient File Stop Codes 516 and 562 comprise the data in this table.

Table E-3. VA PTSD Outpatient Treatment by Specialists, by Facility, FY 2003*

VISN	STA. CODE	FACILITY		Stops 516 + 562		Specialized Outpatient PTSD Programs Open in FY'03
				# VISITS	#UNIQUE VETERANS	
1	518	Bedford	MA	1496	66	PCT, WSDTT PCT, SUPT PCT, SUPT PCT
1	523BZ	Boston (OPC)	MA	763	90	
1	523	Boston HCS: Boston	MA	158	36	
1	523A5	Boston HCS: Brockton	MA	814	129	
1	402GA	Caribou	ME	52	34	
1	689	Connecticut HCS: West Haven	CT	823	322	
1	650GB	Hyannis CBOC	MA	76	13	
1	631	Northampton	MA	463	61	
1	650	Providence	RI	319	14	
1	402	Togus	ME	2464	358	
2	528GN	Binghamton CBOC	NY	225	9	PCT
2	528A8	HCS Upstate NY V2 Albany	NY	4201	293	
2	528A6	HCS Upstate NY V2 Bath	NY	2411	468	
2	528GM	Rome CBOC	NY	185	19	
2	528	Upstate NY HCS	NY	1247	93	
2	528A4	Western NY HCS/Batavia	NY	227	14	
3	561BZ	Brick	NJ	3243	162	PCT PCT PCT
3	526	Bronx	NY	660	155	
3	630A4	New York Harbor HCS: Brooklyn	NY	1674	110	
3	620A4	Hudson Valley HCS: Castle Point	NY	911	69	
3	561A4	New Jersey HCS: Lyons	NJ	216	196	
3	620	Montrose	NY	8510	365	
3	620GA	New City (Rockland) CBOC	NY	280	13	
3	632	Northport	NY	4417	197	
4	529	Butler	PA	374	19	PCT
4	540	Clarksburg	WV	2010	286	
4	562	Erie	PA	827	181	
4	642GA	Fort Dix (CBC)	PA	74	21	
4	503	James Van Zandt	PA	1249	64	
4	595	Lebanon	PA	1595	187	
4	642	Philadelphia	PA	1245	140	
5	613	Martinsburg	WV	2310	162	PCT
5	512	Maryland HCS: Baltimore	MD	896	238	
6	637	Asheville	NC	1411	226	PCT
6	658	Salem	VA	1303	212	
7	508	Atlanta	GA	3717	340	PCT PCT PCT
7	619A4		AL	3762	317	
7	544	Columbia	SC	15366	1232	
7	619GA	Columbus OPC	AL	921	225	
7	521GB	Decatur CBOC	AL	328	32	
7	521GC	Florence CBOC	AL	552	22	
7	544GB	Florence CBOC	SC	232	35	
7	544BZ	Greenville SC SOC	SC	840	76	
7	521GA	Huntsville CBOC	AL	588	40	
7	509A0	Lenwood/Augusta	GA	275	90	
7	534GB	Myrtle Beach CBOC	SC	1030	75	
7	521GD	Rainbow City CBOC	AL	875	36	
7	679	Tuscaloosa	AL	5301	1151	
8	673GA	Brevard CBOC	FL	1143	53	PCT PCT PCT PCT
8	573BZ	Daytona Beach soc	FL	1819	116	
8	546GB	Key West (CBC)	FL	199	15	
8	546	Miami	FL	74	63	
8	673BZ	Port Richey soc	FL	1901	129	
8	672	San Juan	PR	57	10	
8	673	Tampa	FL	446	29	
8	548	W Palm Beach	FL	5590	784	

VISN	STA. CODE	FACILITY		Stops 516 + 562		Specialized Outpatient PTSD Programs Open in FY'03
				# VISITS	#UNIQUE VETERANS	
9	581	Huntington	WV	604	67	PCT
9	626BY	Knoxville SOC	TN	67	16	
9	596	Lexington	KY	242	86	
9	614	Memphis	TN	139	22	
9	626	Nashville	TN	1368	58	
9	581GA	Prestonsburg	WV	497	51	
9	626A4	VA TN Valley HCS	TN	570	39	
10	541A0	Brecksville	OH	1233	67	PCT, WSDTT
10	757	Columbus IOC	OH	1257	302	PCT
10	552	Dayton	OH	2361	390	PCT
10	552GC	Richmond CBOC	IN	295	12	
11	515	Battle Creek	MI	1644	322	PCT
11	515BY	Grand Rapids soc	MI	947	81	
11	583	Indianapolis-10th St.	IN	5931	312	
11	610	No. Indiana HCS: Marion	IN	22	1	
11	655	Saginaw	MI	2080	128	
12	695BY	Appleton	WI	511	23	PCT PCT WSDTT
12	537A4	Chicago (Lakeside)	IL	391	15	
12	537	Chicago HCS: West Side	IL	334	30	
12	537BY	Crown Point	IN	33	16	
12	578	Hines	IL	1297	115	
12	585	Iron Mountain	MI	511	55	
12	676GC	Lacrosse CBOC	WI	856	91	
12	607	Madison	WI	330	49	
12	585HA	Marquette	WI	114	20	
12	695	Milwaukee	WI	5351	444	
12	556	North Chicago	IL	5925	738	
12	676	Tomah	WI	4382	410	
12	676PA	Tomah PR RTP	WI	246	53	
12	676GA	Wausau CBOC	WI	801	143	
15	657GJ	Evansville CBOC	IN	192	20	PCT PCT PCT
15	657A5	Marion Div	IL	1175	101	
15	657A4	Poplar Bluff	MO	171	20	
15	657A0	St. Louis/Jeff Barracks	MO	559	51	
15	589A4	Truman VH Columbia	MO	676	53	
15	589	VAMC Heartland-W Kansas	MO	406	229	
16	502	Alexandria	LA	336	50	PCT PCT PCT, WSDTT PCT
16	564	Fayetteville	AR	787	387	
16	586	Jackson	MS	67	53	
16	635GA	Lawton (CBOC)	OK	195	13	
16	520GA	Mobile (CBC)	LA	155	21	
16	564BY	Mount Vernon soc	AR	1382	355	
16	623	Muskogee	OK	379	43	
16	629	New Orleans	LA	48	14	
16	598A0	N. Little Rock	AR	36	19	
16	520BZ	Pensacola soc	FL	233	21	
16	667	Shreveport	LA	2880	189	
16	623BY	Tulsa soc	OK	1748	191	
17	549A4	Bonham VAMC	TX	737	75	PCT
17	674GB	Brownwood CBOC	TX	388	25	
17	674GC	Byran CBOC Centrex	TX	270	20	
17	549	Dallas	TX	256	15	
17	549BY	Fort Worth	TX	1702	110	
17	671A4	Kerrville	TX	647	39	
17	674GA	Palestine CBOC	TX	1488	69	
17	671BY	San Antonio SOC	TX	3341	309	
17	671GB	Victoria (OCS)	TX	245	8	

VISN	STA. CODE	FACILITY		Stops 516 + 562		Specialized Outpatient PTSD Programs Open in FY'03
				# VISITS	#UNIQUE VETERANS	
18	504	Amarillo HCS	TX	1261	357	PCT
18	501GA	Artesia (CBC)	NM	27	16	
18	756	El Paso HCS	TX	1268	275	
18	756GA	Las Cruces	TX	709	127	
18	504BY	Lubbock soc	TX	1574	271	
18	644	Phoenix	AZ	846	87	
18	501HB	Raton (ORC)	NM	321	28	
18	644BG	Showlow CBOC	AZ	375	28	
18	519	West Texas HCS	TX	104	15	
18	678GB	Yuma (CBC)	AZ	83	13	
19	436	Fort Harrison	MT	140	8	PCT
19	575	Grand Junction	CO	344	21	
19	554GG	La Junta CBOC	CO	342	22	
19	554GH	Lamar CBOC	CO	201	12	
19	554GD	Pueblo CBOC	CO	2514	169	
19	666GC	Riverton COBC	WY	94	19	
19	666	Sheridan	WY	301	19	
20	463	Alaska HCS & RO	AK	557	63	PCT
20	653GA	Bandon	OR	409	50	
20	653GB	Brookings CBOC	OR	297	37	
20	653BY	Eugene soc	OR	542	70	
20	663	Puget Sound HCS: American Lake	WA	383	123	
20	687GA	Richland CBOC	WA	135	26	
20	653	Roseburg	OR	3746	202	
20	687	Walla Walla	WA	710	77	PCT
21	570	Central California HCS	CA	1012	137	
21	662GC	Eureka CBOC	CA	1097	197	
21	459GB	Hilo	HI	521	148	
21	654	Reno	NV	531	38	
21	612A4	Sacramento VAMC	CA	775	67	
22	691	Greater LA HCS	CA	12542	662	PCT
22	605	Loma Linda	CA	576	57	PCT, WSDTT
22	600	Long Beach	CA	4513	256	PCT
22	600GC	Long Beach CBOC	CA	285	106	
22	691GB	Santa Barbara CBOC	CA	39	10	
22	691A4	Sepulveda OPC (Div)	CA	1986	123	
23	656GA	Brainerd CBOC	MN	1277	98	PCT
23	636GC	CBOC Mason City	IA	534	57	
23	437	Fargo	ND	46	3	
23	568A4	Hot Springs	SD	199	15	
23	636	Nebraska-Western IA HCS: Omaha	NE	178	20	
23	568HJ	Rosebud IHS Hospital	SD	105	13	
23	656	St. Cloud	MN	7630	328	
23	438	Sioux Falls	SD	139	17	PCT
23	636A6	VA CPHN Des Moines	IA	1680	266	PCT
23	636A4	VA CPHN Grand Island	NE	1608	259	
165 sites		TOTAL		209,539	21,560	
		MEAN		1,318	136	
		STD		2,067	184	

*Entries in the Austin Outpatient File from Stop Codes 516 (group visits) and 562 (individual visits) comprise the data in this table.

Appendix F

Acronyms and Abbreviations Used in the Text

Acronyms and Abbreviations

ASI	Addiction Severity Index
AVG	Average
BD	Bed Days
CDR	Cost Distribution Report
C.V.; CV	Coefficient of Variation
DC; D/C	Discharge
DD214	Dept. of Defense Form #214
DH	Day Hospital
Dx (Dx'd)	Diagnosis (Diagnosed)
EBTPU	Evaluation and Brief Treatment PTSD Unit
FTEE	Full Time Employee Equivalent
FY	Fiscal Year
INDVDLS	Individuals
LOS	Length of Stay
M	Mean
MH	Mental Health
N	Number
NEPEC	Northeast Program Evaluation Center
PCT	PTSD Clinical Team
PDP, PTSD Dom	PTSD Domiciliary Program
PRRP	PTSD Residential Rehabilitation Program
PSF	PTSD Status Form
PTF	Patient Treatment File
PTSD	Posttraumatic Stress Disorder
PTSS	Posttraumatic Stress Syndrome
RCS	Readjustment Counseling Service
SA	Substance Abuse
SC	Service Connected
S.D.; SD; STD	Standard Deviation
SEP	Special Emphasis Program
SIPP	Specialized Intensive PTSD Program
SIPU	Specialized Inpatient PTSD Unit
SOPP	Specialized Outpatient PTSD Program
SUPT	Substance Use PTSD Team
Tx	Treatment
VA	Dept. of Veterans Affairs
VAMC	Dept. of Veterans Affairs Medical Center
VHA	Veterans Health Administration
VISN	Veterans Integrated Service Network
WSDTT	Women's Stress Disorder Treatment Team
WSI-1	War Stress Interview - Part 1
WTRP	Women's Trauma Recovery Program

